

**Understanding Options Counseling Experiences in Adoption:
A Quantitative Analysis of First/Birth Parents and Professionals**

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EXECUTIVE SUMMARY

While no official statistics are kept regarding the number of domestic infant adoptions each year (Simmonds & Likis, 2005; Zamostny, O'Brien, Baden, & Wiley, 2003), rough estimates suggest that approximately 38 percent of all adoptions in the United States are private domestic (Vandivere, Malm, & Radel, 2009). The vast majority of these adoptions involve infants. Adoption practice has changed drastically over the past 50 years and with that some important gains have been made in strengthening expectant parents' rights (Donaldson Adoption Institute, 2007; U.S. Department of Health and Human Services, 2013). Despite these gains, there is little uniformity across states, or even among agencies, regarding the adoption process or the types and formats of information that is shared with expectant parents who are considering relinquishing their parental rights to their child for adoption. Options counseling refers to an individualized assessment and counseling process whereby women and men who are experiencing a crisis or unintended pregnancy are assisted in objectively evaluating their options (i.e., parenting the child, relinquishment of parental rights to the child for adoption, termination of the pregnancy, as well as other options such as temporary foster care or placement with relatives). Parents are supported in making a decision based on their own personal values, needs, and preferences. This process is vital to ensuring that expectant parents are able to make a decision free of coercion, misinformation, and outside pressures (Donaldson Adoption Institute, 2007; Johnson & Faase, 2012; Samuels, 2005; Singer, 2004). Despite the ethical and best-practice implications of ensuring expectant parents have access to bias-free options counseling, only about half of states in the United States even mention counseling in laws relating to adoption, and of those most merely advise, rather than mandate, that expectant parents be made aware that counseling is available (Donaldson Adoption Institute, 2007; U.S. Department of Health and Human Services, 2013a).

To date, no research has been conducted to determine the frequency or manner with which adoption agencies and other adoption practitioners provide expectant parents with information about the full range of available options. The Donaldson Adoption Institute (DAI) first explored the subject in their 2007 report "[Safeguarding the Rights and Well-Being of Birthparents in the Adoption Process](#)". The report concluded, "In reality, we do not know the extent to which all options are presented to women seeking counseling for unplanned pregnancies or in what manner they are presented, because research has not addressed this question in the past two decades" (p. 29). To gain a fuller understanding of the context in which options are presented and discussed with expectant parents facing a crisis pregnancy, the Donaldson Adoption Institute partnered with The University of Texas at Arlington to conduct the first significant study on the subject.

The primary objective of this study was to understand the decision-making experiences of women and men who have placed a child for adoption, as well as the context in which options surrounding crisis pregnancies are discussed with expectant parents by professionals in the adoption community. Because this study sought to learn more about an area that has been sparsely researched, a mixed-method approach was utilized to address the questions posed in this study. As

"I truly don't feel as though there are enough protections in place for birthmothers or resources out there to help us make an informed choice. I think if I had more help and resources, and the ability to not have the prospective parents (and my parents) pressure me the way that they did, I think my life would be very different."

—first/birth mother

such, the study was designed to include two distinct phases. Phase I consisted of a survey with first/birth parents and a survey with adoption professionals. This phase of the study sought to examine the types of services, materials, information, and support offered to first/birth parents when they were considering adoption as a choice for their child. Professionals involved in private adoptions were also invited to participate in a survey that examined what services, materials, and interventions they provide as a part of their routine practices with first/birth parents seeking information on adoption. Phase II consisted of a subsample of the larger study for in-depth analysis regarding the opinions of first/birth parents and adoption professionals for what should be discussed and offered to parents seeking information on adoption. The current report represents Phase I of the study and includes findings from two online surveys (i.e., survey of first/birth parents and a survey of adoption professionals). In order to understand the full complexity of the adoption experience, it is important to start with the experiences of first/birth parents.

Major Findings from First/Birth Parents

Of the 223 first/birth mothers in the study, more than two-thirds reported that they seriously considered other options besides adoption, most commonly to parent their child. However, the majority of first/birth mothers who participated in this study also reported limited to no access to information about parenting. Furthermore, an overwhelming majority indicated they would have liked more knowledge about resources that could help them potentially parent their child. Supportive services is a broad term that is typically inclusive of emotional and social support but also more tangible resources, such as financial and housing assistance. For many of the first/birth mothers in this study, the lack of emotional and social support they felt they needed to successfully parent was one of the deciding factors in their decision to relinquish their parental rights to their child for adoption. Similarly, financial and housing concerns provided additional

“Adoption was presented to me from the very beginning as the only realistic option for someone with as little resources as me, but I never wanted to place and tried hard for many months to defend keeping her. Being told that I could have an open adoption with as much contact as I wanted was ultimately the most influential thing I was told that made me accept adoption . . . the information on adoption and parenting given to me by the agency was very one sided and incredibly misleading. I was never given any information on the trauma caused to both mother and child though separation. So far my adoption experience has been nothing like what the agency told me I could expect. I feel as though I was coerced into making the worse decision of my life—one I will suffer and regret for the rest of my life.”

—first/birth mother

pressure, with approximately four of every five first/birth mothers in this study citing financial concerns as one of the reasons they chose to relinquish their parental rights to their child for adoption. The findings of this study suggest that pressure is experienced from a variety of sources, with the most common sources being immediate family.

As first/birth mothers reported about the available people in their personal life who could provide support, a common phenomenon that emerged was that of isolation. Approximately half of the first/birth mothers lacked family or friends with whom they could share their concerns and feelings. Isolation, in this instance, does not mean that their families and friends were physically absent from the lives of the first/birth parents in this study. Rather, the responses of first/birth mothers suggest that they

felt their families were unavailable for emotional and practical support to help them make a decision regarding their pregnancy that allowed for thoughtful consideration of other alternatives, specifically parenting their child. This experience of isolation during the decision-making process was likely compounded by the feeling many first/birth mothers had of professionals (i.e., attorneys, agency professionals/caseworkers, and/or counselors) working their case who failed to advocate with family members to support their interests.

Attorneys were the professionals least likely to be perceived as advocates. This finding is somewhat expected given that only about one in five of the first/birth mothers had access to their own legal representation. Typically, this meant the attorney “representing” the mother was employed by the prospective adoptive parents or the adoption agency. About half of the first/birth mothers who shared their experiences expressed that they did not have sufficient time, or opportunity, to speak privately with the attorney as a family member was often in the meeting with them.

Furthermore, the responses of first/birth mothers who reported on information they received from an attorney, suggest that there was little consistency in the information they were provided with in regards to the content or scope of the topics discussed. When first/birth mothers were asked about specific types of options, services, and legal rights that would have been beneficial to understand during the decision-making process, anywhere from one-third to three-quarters of the respondents indicated that they did not receive pertinent information from an attorney. A common theme in the responses of first/birth mothers was a desire for increased information regarding the various legal aspects of adoption.

For many of the first/birth mothers, the experiences they had with attorneys were mirrored with other professionals with whom they worked. While each type of professional (i.e., attorneys, agency professional/ caseworkers, and counselors) possessed different strengths, independent counselors were the group most likely to be viewed by first/birth mothers as advocates. Additionally, the findings also show that compared to their counterparts, independent counselors were more likely to provide first/birth mothers with information about the various options available to them, as well as information about specific resources in the community related to parenting. According to the findings, agency professionals/caseworkers were the group most likely to provide information about services and legal aspects of adoption, while attorneys were more likely to focus on specific topics within the more narrow scope of their expertise. Regardless, first/birth mothers experienced a tremendous amount of inconsistency with regard to the information that was shared with them and how the information was discussed.

The findings indicate that the experiences of many first/birth mothers, as they moved from pregnancy through decision-making to relinquishment and post-adoption, were traumatic and were punctuated by limited information and resources, external pressures, and lack of support. However, the findings also show that one-third of first/birth mothers who participated in the study experienced a more successful and less burdensome decision-making and relinquishment experience. For these women, the decision to relinquish their parental rights to their child for adoption was largely based on their own wishes. Additionally, this subset of first/birth mothers reported satisfaction with their decision to relinquish.

“I stand by my decision 1000%. It was the right decision and I love my son's family. I still feel regret. Knowing that you did the best thing doesn't mean you get to never feel regret.”

—first/birth mother

Major Findings from Adoption Professionals

The adoption professionals (N=141) who participated in the survey were highly educated, with most having at least a Master's degree, and tended to have a demonstrated commitment to the field, with slightly less than three-fourths of adoption professionals having worked for five or more years. Concurrently, most respondents report feeling a high level of confidence in the provision of services. Additionally, adoption professionals in this study reported receiving training from a variety of different sources, with the vast majority receiving on-the-job training. As there are no uniform standards that agencies are mandated to follow, this training varies from agency to agency. Additionally, few professionals reported attending adoption-focused conferences, which would offer the opportunity to share new practices with others and to gain new perspectives from other members of the adoption triad who may be in attendance.

Differences among agencies may also be reflected in the responses of participants regarding the number of expectant mothers with whom they worked during the year and in the number of sessions they had with each mother. While a clear plurality of participants had a significant number of face-to-face visits with the mothers (6-9), about as many had five or fewer as those who had 10 visits or more. This significant variation in the number of visits may be linked to training or rapport with the mothers. Of course, this difference may also be reflected in the time at which the expectant mother comes to the agency (late in the pregnancy versus early in the pregnancy). Professionals employed by a private agency were significantly more likely to have increased face-to-face sessions with expectant mothers.

Little uniformity was found in the types of information and materials that were provided to expectant mothers. While nearly every participant reported providing written materials regarding adoption, less than half provided access to videos or other visual materials and only slightly more provided website information. When asked about providing information and materials regarding parenting, all participants reported doing this less frequently, regardless of the type of materials. Written materials were still the most commonly provided materials at about three-quarters; however, no other types of materials and/or contacts were available to more than half of respondents. In fact, information from other expectant parents considering adoption and parents who considered adoption but chose to parent were among the least available sources of information.

When asked about the frequency with which they discussed specific topics, nearly every participant reported discussing the topics either most of the time or all of the time. Conversations relating to termination of the pregnancy were the only exception to this trend. Slightly more than a quarter of the participants reported discussing the option to terminate a pregnancy with every client, and the proportion increased to about one-third when factoring in those who said they do this most of the time. Additionally, when discussing community resources where termination could be sought, about one-third reported always providing this information but almost 40 percent said they never do. The lack of dialogue about abortion/termination could possibly be attributed to the faith-based nature of many adoption agencies. However, it may be a reflection of the fact that many first/birth parents in the survey had already weighed termination prior to seeking services from adoption professionals and determined it was not a suitable option moving forward.

Key Recommendations

- ***Develop and Adopt Best-Practice Guidelines for The Provision of Options Counseling*** - Adoption professionals reported providing information at a greater frequency than first/birth mothers reported receiving it. Due to the external forces that pressure many expectant mothers to consider

adoption and the physical and emotional toll of pregnancy and delivery, expectant mothers may benefit from multiple conversations, when possible, to ensure that they are able to adequately weigh the information and assess the various services available. To counter the discrepancy between the agency professionals' and first/birth mothers' reported experiences surrounding different types of information, national guidelines should be developed and adopted that clearly delineate the specific information that should be discussed with expectant parents.

- ***Develop and Adopt Evidence-based Written Materials about Options*** - First/birth mothers reported varying degrees of access to written information about their options. Therefore, the provision of evidence-based written materials about all options should be established as a best practice. This material should be regulated, and perhaps developed at the national level to foster uniformity and reduce bias in the information provided to expectant parents. Additionally, the materials should be made available online for wide distribution. Adoption professionals could be mandated to provide this material to all expectant parents as a starting point for more in-depth exploration of supports available in their community. In addition, having well-developed written materials that can be shared with family and friends may result in natural support systems who are better informed and, thus, more capable of assisting expectant parents as they consider their options.
- ***Establish Best-Practice Guidelines for Persons Providing Options Counseling*** - First/birth mothers overwhelmingly reported the helpfulness of access to independent counselors. Additionally, a greater number of first/birth mothers reported receiving more information about the full range of their options from counselors than attorneys or agency professionals. While some states mandate that expectant parents either be provided or made aware of counseling services, few provide guidelines for who should offer this service. This finding suggests that independent counselors may not only be the most likely to present options counseling to expectant parents, but also that they may be best suited to provide information on options in an impartial and non-biased manner. Therefore, best practices guidelines about the use of independent counselors for expectant parents in a crisis pregnancy should be established.
- ***Increase Expectant Parents' Access to Support Groups and Other Parents*** - Isolation was a common experience for many of the first/birth mothers. However, only a small percentage were referred to support groups for expectant parents and there was no universal access to support groups post-adoption. Yet, at both stages, first/birth mothers who participated in these groups tended to find them a valuable source of support. Therefore, adoption professionals, particularly agency professionals/caseworkers who provide access to information and services, should prioritize the use of support groups involving first/birth parents who have placed a child, as well as those with other expectant parents who are considering adoption, during the decision-making and post-adoption phases of the process. Additionally, parents who considered adoption for their child, but instead who decided to continue parenting, should also be made available to expectant parents.
- ***Inform Expectant/New Parents about Available Financial and Housing Resources*** – Financial and housing concerns were the first and third, respectively, most common pressures first/birth mothers reported in their decision-making process. Financial concerns were the number one reason identified by first/birth mothers for relinquishing their parental rights. Adoption professionals, particularly agency professionals/caseworkers, have a responsibility to ensure that expectant/new parents are aware of public and private assistance programs that can provide financial and housing support. Greater information about social services could help reduce the financial pressures that ultimately lead some parents to relinquish their parental rights to their child for adoption.

- ***Provide Expectant/New Parents with Access to Unbiased Legal Representation*** - First/birth mothers expressed a repeated desire for access to legal representation and information. While adoptive parents and adoption agencies typically have legal staff that represents their interests, it was not uncommon for first/birth mothers to report that they did not have access or support focused on ensuring that they fully understood applicable adoption statutes and their legal rights. It is imperative that expectant mothers have access to unbiased legal representation who can educate, support, and advocate for expectant parents as they deliberate their options. Furthermore, it is important for parents to have legal representation after the child is born, particularly if they are reconsidering the relinquishment of their parental rights or if their state has legally binding open adoption agreements.
- ***Establish and Adopt a Standard Waiting Period*** – A national standard for minimum wait periods before relinquishment papers can be signed should be established. While a high percentage of agency professionals supported a waiting period of three or fewer days after the child's birth before relinquishment papers could be signed, many first/birth mothers supported a longer waiting period, with one in three supporting a period of 8 or more days. Since the decision to relinquish is so profound, providing an empirically supported wait period that is uniformly endorsed may reduce the parent's distress, as well as increase a parent's certainty about his or her ultimate decision. Additional research is needed to determine the most appropriate length for a minimum wait period.
- ***Best Practice Guidelines for Therapeutic Work with Expectant Parents*** – Adoption professionals utilize a wide array of therapeutic approaches in their work with expectant and first/birth mothers. Additional research is needed to ascertain the effectiveness of the approaches used in helping expectant parents more fully understand the implications of all of their options, explore the resources and services that are available to them, reduce the impact of external pressures on their decision-making process, and, ultimately, help them select the option that is best for them. It may be that certain interventions are more effective in empowering expectant mothers to make decisions throughout the process.
- ***Establish Best Practice Guidelines for Education and Therapeutic Work with Expectant Parents' Families*** – Many of the first/birth mothers in this study reported a lack of emotional and social support during their decision making process. In fact, lack of support was one of the leading factors for many first/birth mothers in their decision to relinquish their parental rights to their child for adoption. Providing education and family counseling to expectant parents and their family members might provide a neutral forum for families to address miscommunications, needs, and emotional strains resulting from the pregnancy, which might allow family members to be a better support to the expectant parents' during the decision-making process. Additionally, education about community resources could allay families' fears that expectant parents would not be able to support their child.

Conclusion

Many first/birth mothers in the study indicated that relinquishing parental rights to their child for adoption was their best option at that time. However, for too many others, the lack of resources and support, compounded by the external pressures that many felt to choose adoption, created an environment that was void of choice and viable options. As a result, many first/birth mothers reported that their decision to relinquish their parental rights to their child for adoption has had a negative impact on their lives.

Parenting-focused information and services provided to the first/birth mothers ensures they will have the ability to make a truly informed decision about their options. For options counseling to be a just and effective practice, equal attention should be devoted to all options. Expectant parents deserve access to trained, informed, and unbiased adoption professionals (i.e., attorneys, agency professionals/caseworkers, and independent counselors) who will advocate for their rights and help ensure they have all of the necessary information and resources needed to make an informed decision. Safeguarding the rights of expectant parents will help ensure that adoption becomes a valid and coercion-free option that enables a parent to make the best decision for their child.

INTRODUCTION

No official statistics are kept regarding the number of domestic infant adoptions each year (Simmonds & Likis, 2005; Zamostny, O'Brien, Baden, & Wiley, 2003). The 2007 National Survey of Adoptive Parents suggest that approximately 38 percent of all adoptions in the United States are private domestic adoptions, the vast majority of which involve infants (Vandivere, Malm, & Radel, 2009). Due to an increase in access to birth control, the legalization of abortion services, and a decrease in stigma attached to unwed, single parenting, the percentage of parents who relinquish their parental rights to their child for adoption has dropped consistently over the past 40 years, declining from 8.7 percent prior to 1973 to approximately 0.9-1.0 percent in 2002 (Chandra, Abma, Maza, & Bachrach, 1999; Jones, 2008).

Historically, unmarried women who became pregnant were pressured to relinquish their parental rights to their child for adoption and were given little to no information about possible alternatives (Ellison, 2003; Fisher, 2012; Johnson & Faase, 2012; McAdoo, 1992). Before the 1970s, when advocates began to speak out on behalf of first/birth parents, attachment theory dictated that mothers be separated from their children as soon after birth as possible (Ellison, 2003). Under the threat of intense social stigma, first/birth mothers who placed a child for adoption during this era generally had little say in the adoption process (Donaldson Adoption Institute, 2007; Wegar, 1997).

The landscape and practice of adoption has altered drastically over the past 50 years. Beginning in the 1960s, advocates for expectant parents' rights began calling for increased protections for expectant and first/birth parents, including, but not limited to, the time required before a woman is allowed to relinquish her parental rights after the birth and a revocation period in which a mother can change her mind without having to prove to the courts that it is in the best interest of the child (Donaldson Adoption Institute, 2007; U.S. Department of Health and Human Services, 2013). As a result of these advocacy efforts, some important gains have been made in strengthening expectant and first/birth parents' rights. Currently, at least 30 states and the District of Columbia now require a mandated waiting period before a relinquishment of parental rights may be signed (U.S. Department of Health and Human Services, 2013). The specific waiting period varies widely from state-to-state ranging from the ability to sign during the pregnancy (i.e., Alabama and Hawaii) to a mandated waiting period of fifteen days after the birth in Rhode Island. Generally, the average waiting period required by law is 72 hours after the birth (includes at least 16 states and the District of Columbia) (U.S. Department of Health and Human Services, 2013). However, despite the limited, and sometimes vague, protections that have been put in place to protect expectant and first/birth parents, advocates argue that these measures are insufficient and do not ensure adequate protections for expectant and first/birth parents (Donaldson Adoption Institute, 2007).

Research has shown that the decision to relinquish parental rights to a child for adoption is a difficult process for parents and can be fraught with conflicted feelings and sadness (Wiley & Baden, 2005; Winkler, Brown, van Keppel, & Blanchard, 1988). To make a sound and informed decision about relinquishment, it is essential that expectant parents be presented with accurate information that enable them to weigh the advantages and disadvantages of all possible options for the pregnancy (Johnson & Faase, 2012; Simmonds & Likis, 2005; Singer, 2004). Some advocates, however, have observed that expectant parents are not always provided with clear and non-directive information about all options and resources available to them, or the implications associated with each decision (Donaldson Adoption Institute, 2007; McAdoo, 1992; Wiley & Baden, 2005). Additionally, some evidence suggests that subtle coercion or intimidation of expectant parents can arise from a number of sources, including partners or spouses, family members, and friends (Ellison, 2003). Furthermore, adoption agencies and other professionals serving expectant parents

can also place undue pressure on those considering this important decision (Baden, Gibbons, Wilson, & McGinnis, 2013; Donaldson Adoption Institute, 2007; Ellison, 2003).

Advocates of first/birth parents suggest that it is paramount that new mothers have time after they are released from the hospital to process their decision—independent of outside influences—and determine whether relinquishment is truly in their best interests (Donaldson Adoption Institute, 2007). Samuels (2005) notes that in a number of first-world countries consent does not become irrevocable for as many as six weeks. However, in the United States, only a handful of states and the District of Columbia have laws that recognize a time period after the relinquishment papers have been signed in which the first/birth mother can nullify the contract without having to prove fraud, duress, coercion, or that it would be in the best interest of the child (Samuels, 2005; U.S. Department of Health and Human Services, 2013a). These allotted time periods range from three days in Maine to 60 days in Delaware (Delaware Domestic Relations Code, § 909; Maine Probate Code, §9-202; U.S. Department of Health and Human Services, 2013a). In cases where the first/birth mother is able to contest the contract based on the best interest of the child, the adoptive parents almost always have the legal upper hand. Adoptive parents are generally more affluent, established, and have usually had custody of the child since its birth (Donaldson Adoption Institute, 2007).

OPTIONS COUNSELING

Options counseling refers to an individualized assessment and information-sharing process whereby women and men who are experiencing a crisis or unintended pregnancy and are seeking guidance are assisted in objectively evaluating their options (i.e., parenting the child, relinquishing their parental rights to their child for adoption, or termination of the pregnancy) and are supported in making a decision based on their own personal values, needs, and preferences. Components of options counseling should include support for expectant parents, information about each alternative (i.e., parenting the child, relinquishment of parental rights to the child for adoption, termination of the pregnancy, as well as other options such as temporary foster care or placement with relatives), linkages with appropriate resources that are needed, discussion of relevant legal considerations and consequences of each option (Johnson & Faase, 2012; Samuels, 2005; Simmonds & Likis, 2005; Singer, 2004). Additionally, expectant parents should be provided opportunities to freely explore concerns and ambivalence they may be feeling about different options (Johnson & Faase, 2012; Samuels, 2005; Singer, 2004). Using neutral language, information regarding each option should be provided to expectant parents orally and in writing (Samuels, 2005). Finally, counseling should be provided in a way that respects the expectant parent's autonomy and right to self-determination, as the service is essential to the concept of "informed consent" (Johnson & Faase, 2012; Singer, 2004).

Professionals who counsel expectant parents should be knowledgeable about the different options available to parents experiencing a crisis pregnancy, as well as skilled in building a trusting, non-judgmental relationship that is based on respect and empathy for the client's situation (Simmonds & Likis, 2005; Singer, 2004). Unfortunately, very few academic programs in Social Work, Counseling and Psychology provide students with information regarding the skills, knowledge, and ethics associated with counseling parents who are experiencing a crisis pregnancy. Furthermore, a review of relevant scholarly literature suggests that options counseling from the perspective of adoption professionals is rarely discussed in the professional literature. Rather, the literature largely focuses on counseling provided to women seeking to terminate their pregnancies.

Options counseling is vital to ensuring that expectant parents are able to make a decision free of coercion, misinformation, and outside pressures (Donaldson Adoption Institute, 2007; Johnson & Faase, 2012; Samuels, 2005; Singer, 2004). However, only about half of states in the United States mention counseling in

laws relating to adoption, and of those most merely advise, rather than mandate, that expectant parents be made aware that counseling is available (Donaldson Adoption Institute, 2007; U.S. Department of Health and Human Services, 2013a). Among those states that do mandate or advise that counseling be made available to expectant parents only a small number provide explicit guidance for adoption professionals regarding the range of information that must be shared, the duration and number of required sessions (including post-relinquishment), or who may provide counseling (Donaldson Adoption Institute, 2007; Johnson & Faase, 2012).

During these counseling sessions, expectant parents should be given the opportunity to objectively ask questions, explore the possibility of parenting, adoption, or termination of the pregnancy (Simmonds & Likis, 2005). Ethical and best practice guidelines require that expectant parents be informed of all their options, free from the agency or counselor's bias. As previously mentioned, it is vital that expectant parents be made aware of the legal and emotional repercussions of their decision. For example, there are few legal protections that allow a first/birth parent to nullify his or her decision or ensure that he or she will be granted the visitation promised in a post-adoption contact mediated agreement (Samuels, 2005). Currently, only 28 states and the District of Columbia have statutes that permit enforceable post-adoption contact agreements. However, in these states, parties to the agreement may petition the court to modify or void the agreement if the circumstances have changed and if the change is determined to be in the child's best interests. (U.S. Department of Health and Human Services, 2014). With any choice that an expectant parent makes, options counseling enables the parent to think through and work out any questions, concerns, and logistics in his or her decision-making process (Johnson & Faase, 2012).

"I had no support, no legal counseling, no idea what I was really getting myself into. It's a devastating experience. I have regretted that decision every day of my life since. People like to say "oh you're a hero, you're so brave, you did such an amazing thing..." People have no clue how awful it is to live like this. It is true torture. I would take it back in a heartbeat. There should be strict laws requiring counseling for birth mothers so they really understand what they are getting into."

An additional advantage of options counseling is that, when done well, the potential exists for expectant parents to feel more confident about the decision that is ultimately made, as they have been presented with all of the pertinent information, allowed to evaluate the true feasibility of their options, and been offered a supportive and unbiased environment in which to make their decision. Furthermore, options counseling offers a measure of protection for expectant parents by informing them of the realistic outcomes of the various choices as opposed to any rose-colored pictures that may be painted by biased third parties (Donaldson Adoption Institute 2007, Singer 2004,). To minimize potential stress or trauma, it is vital that expectant parents have a full understanding of the consequences and benefits before making a final decision (Donaldson Adoption Institute, 2007; Johnson & Faase, 2012; Singer, 2004). Nevertheless, there are some limitations to the effectiveness of options counseling. Many expectant parents approach agencies for adoption services later in the pregnancy (Lauderdale, 1992). When this occurs, expectant parents may feel they need to make the choice rather quickly, choosing between the only options that they believe remain available to them - parenting the child or relinquishing parental rights. This can lead to limited sessions with a counselor and rushed decision-making. When this is done, first/birth parents may

ultimately experience regret or discontent with the decision that is made (Donaldson Adoption Institute, 2007).

While the concept of options counseling is not new, very little empirical literature is available on the topic (Singer, 2004). Some guides have been compiled by practitioners in the field; however, Singer (2004) notes that although the guides offer useful information, they are largely based on the experiences of the practitioners and thus, primarily anecdotal nature. To our knowledge, no other studies have addressed the topic of options counseling. In light of this gap in the literature, the primary objective of this mixed methods study was to understand the decision-making experiences of women and men who have placed a child for adoption, as well as the context in which pregnancy options are discussed with expectant parents by professionals in the adoption community.

OVERVIEW OF THE STUDY

Despite the ethical and best-practice implications of ensuring bias-free options counseling, the service has yet to be mandated by law in most states (Donaldson Adoption Institute, 2007; U.S. Department of Health and Human Services, 2013a). Furthermore, to date, no research has been conducted to determine the frequency or manner with which adoption agencies and other adoption practitioners provide expectant parents with information about their full range of options. The Donaldson Adoption Institute (DAI) first explored the subject in its 2007 report "[Safeguarding the Rights and Well-Being of Birthparents in the Adoption Process](#)". The report concluded, "In reality, we do not know the extent to which all options are presented to women seeking counseling for unplanned pregnancies or in what manner they are presented, because research has not addressed this question in the past two decades" (p. 29). To gain a fuller understanding of the context in which options are presented and discussed with expectant parents facing a crisis pregnancy, the Institute partnered with The University of Texas at Arlington to conduct the first significant study on the subject.

The multidimensional nature of the topic necessitated a robust methodology inclusive of the experiences of women and men who have placed a child for adoption, as well as the experiences of professionals in the field of adoption who counsel expectant parents. Because this study sought to learn more about an area that has been little studied, a mixed-method approach was utilized to address the questions posed in this study. By relying on multiple perspectives and using different approaches for collecting data, we enhanced the design of the study with the goal of developing a comprehensive understanding of the issue. As such, the study was designed to include two distinct phases:

Phase I: The first phase of this study includes two online surveys: 1) a survey of first/birth parents and 2) a survey of adoption professionals. This phase of the study was specifically designed to explore the type and nature of information provided to expectant parents who are considering adoption. Women who had voluntarily relinquished parental rights to an infant for adoption in the United States during the last 25 years (after 1989) were invited to participate in the survey of first/birth parents.¹ In addition, professionals in the field of adoption who provide counseling and/or direct-services to expectant parents were invited to participate in a separate survey targeting adoption professionals.

¹ First/birth fathers who had relinquished parental rights to their child for adoption in the United States during the last 25 years (after 1989) were also invited to participate in the survey of first/birth parents; however, only six first/birth fathers responded to the survey. While the contribution of first/birth fathers to this study is not inconsequential, the comparatively low number of responses from first/birth fathers (n=6) posed significant analytical challenges and prohibited us from drawing meaningful conclusions about their experiences.

Phase II: The second phase of this study was designed to explore in greater depth the overall context in which options are discussed with expectant parents, as well as advice that first/birth parents and adoption professionals have for expectant parents who are considering relinquishing their parental rights to their child for adoption. To explore the context in which options are discussed with expectant parents, a subsample of first/birth parents and adoption professionals who participated in Phase I of the study were invited to participate in in-depth qualitative interviews.²

The Current Report

The current report represents Phase I of the study and includes findings from two online surveys (i.e., survey of first/birth parents and a survey of adoption professionals). It is important to note that the results presented in this report are based on respondents who were exposed to the surveys and who in turn chose to participate. Therefore, it is not possible to know the extent to which the respondents of these two survey represent the views of other first/birth parents and adoption professionals. While most of the items on the surveys were close-ended, one open-ended question was included at the end of each survey that allowed respondents to further illustrate points and elaborate on their circumstances. This report includes many of their comments, in their own voices. All identifying information, as well as some contextual references, have been removed from the quotes in order to protect the respondents' privacy. Due to the sensitive nature of this study, an application for Human Participant Protections was filed and approved with the University of Texas at Arlington Institutional Review Board (IRB) before recruitment or data collection efforts were undertaken.

Additionally, it should be noted that the term “first/birth” parent or mother is used to refer to mothers who have relinquished their parental rights to their child for adoption. In contrast, the term “expectant” parent or mother is used to identify mothers who are pregnant and weighing the options available to them and their child. The term “first/birth” parent or mother is used throughout the findings of this report because the study surveyed first/birth mothers - women who had voluntarily relinquished parental rights to an infant for adoption in the United States during the last 25 years.

² A report for Phase II of this study will be released in spring 2017.

PART I: SURVEY OF FIRST/BIRTH PARENTS

METHODOLOGY

Recruitment of Participants

Potential participants for the survey of first/birth parents were recruited through a number of different methods with the intent of maximizing the number of responses. Only women and men who had relinquished a child for adoption in the United States during the last 25 years (i.e., after 1989) were eligible to participate in the survey.³ The study was announced on DAI's website and monthly newsletter. Online interest, advocacy and support groups, blogs, and listservs were also asked to publicize the study, as was Adoption.com. In addition to the above recruitment methods, some participants were recruited for the study through snowball sampling; that is, respondents were asked to forward information about the survey to other potential participants. Because participant incentives were not feasible for all respondents, those who completed the survey were provided with the option of entering their names into a drawing to win one of six \$100.00 gift cards.

Survey data were collected between November 2015 and July 2016 via Qualtrics, a secure web-based tool for conducting online surveys. In total, 386 individuals accessed the survey; however, for various reasons, 163 surveys were excluded.⁴ The final sample size for analysis was 223 respondents. Due to the methods that were used to recruit participants, it was impossible to determine the response rate.

Demographic Characteristics of Survey Respondents

Respondents in the sample for this analysis were all female (n=223, 100%). As shown in Table 1, first/birth mothers ranged in age from 19 to 53 years ($M=34.5$, $SD=8.68$). The vast majority of first/birth mothers relinquished parental rights to one child; however, a small proportion of mothers reported relinquishing parental rights to more than one child. First/birth mothers reported parenting between 0 and 6 children ($M= 1.29$, $SD=1.42$). The vast majority of respondents (n=195, 87.4%) self-identified as Caucasian/White; the next largest group was biracial/biethnic respondents (n=16, 7.2%). The smallest racial/ethnic category was "Other" (n=2, .9%). In general, first/birth mothers in this sample were highly educated, with the

³ This time period was selected because it is reflective of an increased emphasis on openness in adoption arrangements between first/birth parents and adoptive parents.

⁴ The first/birth parent survey was accessed a total of 386 times. Of those, six files had no data (n=380), seven respondents did not identify as a first/birth mother or first/birth father (n=373), and 20 respondents either had not reported or indicated they had not relinquished a child for adoption (n=353). Thirty-five respondents either had not reported a timeframe or had relinquished a child for adoption prior to 1990 and were outside the parameters of the project (n=318). An additional seven respondents were removed from the current analysis, as they identified as first/birth fathers (n=311); the low number of responses from first/birth fathers prohibits the ability to analyze or draw conclusions about their experiences. An additional 14 cases were removed due to respondents failing to provide any additional information after the year of relinquishment (n=297). Three cases were removed due to unusual circumstances surrounding the relinquishment (i.e., custody battle or older child) (n=294). Twenty-five cases were removed as survey participants quit the survey while answering demographic questions or questions about their pregnancy; these respondents provided no responses to questions about options support or services, the focus of the research (n=269). Finally, 46 cases were removed due to missing or incomplete data, providing a final analytic sample of 223 cases for analysis.

majority (n=173) reporting having attended at least some college. Slightly more than half of respondents (n=116, 52%) were employed full time while the remaining first/birth mothers reported either staying at home as caretakers (n=36, 16.1%), working part-time (n=32, 14.3%), looking for employment (n=16, 7.1%), or “other” (n=23, 10.3%). With regard to income, slightly less than one fourth of the sample reported an annual income of less than \$20,000. Approximately half of the first/birth mothers (n=116, 52%) reported annual incomes between \$20,000 and \$79,999. A majority of first/birth mothers (n=134; 60.1%) reported that they were either married (n=91, 40.8) or living with a partner (n=43, 19.3%). Finally, First/birth mothers resided in a total of 38 different states and the District of Columbia.

Table 1 First/Birth Mother Demographics at Time of Survey (n=223)

Variable	Mean	SD
Age at Time of Survey (Years) (range 19.26-53.50 years)	34.51	8.68
Number of Individuals in Household (range 1-8)	3.00	1.63
Number of Children Relinquished for Adoption (range 1-3+)	1.07	.29
Number of Children Parented (range 0-6+)	1.29	1.42
Variable	Frequency	Percent
Race Ethnicity		
African American/Black	6	2.7
Biracial/Biethnic	16	7.2
Caucasian/White (non-Hispanic)	195	87.4
Hispanic/Latina	4	1.8
Other	2	.9
Education		
Less than high-school	1	.4
High-school graduate or GED	25	11.2
Some vocational/technical training (after high school)	5	2.2
Completed vocational/technical training (after high school)	19	8.5
Some college/A.A. degree	85	38.1
Completed bachelor's degree	44	19.7
Some graduate training beyond a bachelor's degree	12	5.4
Completed master's degree	24	10.8
Some graduate training beyond a master's degree	3	1.3
Completed doctoral degree or other professional degree (e.g., Ph.D., DDS, JD, MD, etc.)	5	2.2
Employment Status		
Employed full-time	116	52.0
Employed part-time	32	14.3
Stay at home parent	36	16.1
Unemployed, but looking	16	7.1
Other	23	10.3
Annual Household Income^a		
Less than \$20,000	50	22.4
\$20,000--\$29,999	23	10.3
\$30,000--\$39,999	31	13.9
\$40,000--\$49,999	24	10.8
\$50,000--\$59,999	14	6.3
\$60,000--\$69,999	10	4.5
\$70,000--\$79,999	14	6.3
\$80,000--\$89,999	8	3.6
\$90,000--\$99,999	9	4.0
\$100,000--\$109,999	6	2.7
\$110,000--\$119,999	6	2.7
\$120,000 or more	27	12.1
Relationship Status		
Single	64	28.7
Living with partner	43	19.3
Married	91	40.8
Separated	6	2.7

Divorced	16	7.2
Other	3	1.3

Note. Percentages may not add to 100.0% due to rounding; ^a n=222

More than half of the sample (n=119, 53.4%) self-identified as Christian. Twenty (9.0%) reported they were atheists, 25 (11.2%) self-identified as agnostic, and 22 (9.9%) selected the non-specific/spiritual category. Twenty-one (9.4%) indicated none of the religion categories, including “other,” were applicable to them. Within the “other” category (n=13, 5.8%) was a mix of Mormon, pagan, Wiccan, Quaker, Baha’i, and Native American. The sample was almost split between those who rarely or never relied on their religious beliefs to guide their daily decisions and/or values (n=81, 36.3%) and those who very often or always did (n=88, 39.5%). More than one-third (n=80, 35.9%) reported they were inactive in their religious/spiritual practices and 67 (30.0%) indicated they were very or extremely active. (See Table 2.)

Table 2 First/Birth Mothers’ Beliefs and Actions Regarding Religion (n=223)

Variable	Frequency	Percent
Religion		
Agnostic	25	11.2
Atheist	20	9.0
Christian	119	53.4
Jewish	3	1.3
Non-specific/Spiritual	22	9.9
Not applicable	21	9.4
Other	13	5.8
Reliance on beliefs to guide daily decisions and/or values		
Never	47	21.1
Rarely	34	15.2
Sometimes	54	24.2
Very Often	64	28.7
Always	24	10.8
Active in religious/spiritual practices		
Inactive	80	35.9
Not very active	76	34.1
Very active	49	22.0
Extremely active	18	8.1

Note. Percentages may not add to 100.0% due to rounding

Measure

A search of the relevant scholarly literature was conducted to locate validated instruments that might be appropriate for use in this study; however, no surveys were identified that adequately addressed the questions posed in this study. Therefore, a survey was developed specifically for this purpose. The survey consisted of 256 questions covering a wide range of issues, including basic demographic information about respondents and their child(ren); their perceptions and comfort with their decision to relinquish their parental rights to their child for adoption; whether their perceptions and feelings about the experience changed over time; whether they received clear, unbiased information about their options; the types and format of information provided to them; their perceptions about the professionals they worked with; and the context in which adoption was addressed with the first/birth parent (i.e., where, when, by whom). The survey also included questions relating to their understanding of the informed consent and relinquishment process; the role of others (i.e., family, friends, other significant individuals) in their decision-making process; services available to them before and after placement; their utilization of available services; and

how the decision to place their child has impacted their life. See Appendix I for a list of questions included in the survey. Once an initial draft of the instrument was created, further commentary and revision was sought from first/birth parents knowledgeable about survey research methods. The panel was asked to review the instrument with an eye for clarity, bias, and overall face and content validity. Based on the feedback from the expert reviewers, some items were altered to further clarify intent.

Data Analysis

Data for this study were analyzed using Statistical Package for Social Sciences (SPSS) version 24. Univariate statistics were used to examine questions on the survey. An analysis of missing data revealed no significant patterns; therefore, data were assumed to be missing at random. Missing data were not imputed or replaced.⁵

FINDINGS

The Pregnancy

“After having my son years ago, I did not want any more children. When I became pregnant with my child that I placed for adoption, I knew that parenting was not something I wanted to do. I am adopted myself and so I knew adoption was the choice I was going to make for my child. I wish the adoption community was more understanding that not every birthparent chooses to place their child for adoption due to “bad” circumstances.”

—first/birth mother

Feelings about the pregnancy. More than three-quarters (n=177, 79.4%) of the first/birth mothers reported they suspected or realized they were pregnant during their first trimester. Thirty-seven (16.6%) indicated they suspected or knew about their pregnancy during the second trimester. Six (2.7%) first/birth mothers suspected or knew they were pregnant during their third trimester, and three (1.3%) reported they knew they were pregnant at the time of delivery. As Figure 1 illustrates, the largest group of first/birth mothers (n=61, 27.4%) indicated their feelings regarding the pregnancy was that “it was a major disaster in my life.” Another 38 (17.0%) reported the pregnancy made them feel “disrupted and unhappy.” Almost one-third of the first/birth mothers (n=67, 30.0%) indicated they felt either “disrupted, but happy nonetheless” or “very happy about it” regarding their pregnancy. Twenty-six (11.7%) of the first/birth mothers reported a mix of emotions about their pregnancy.

⁵ Due to missing data, as well as the use of a skip pattern during the administration of the survey for questions that were not applicable to certain respondents, it should be noted that the n’s for some sections fluctuate throughout the report.

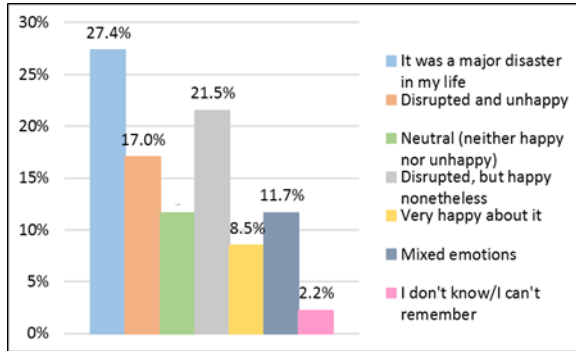


Figure 1 Feelings re: Pregnancy (n=223)

First/birth father involvement. The far majority of first/birth mothers (n=203, 91.0%) indicated they had informed their partners about the pregnancy. Of the first/birth mothers who informed their partners, 199 (98.0%) did so during the pregnancy; four (2.0%) did so after the baby was born. Of the 203 first/birth fathers who were aware, approximately one-third (n=65, 32.0%) were reported to have no involvement with the first/birth mother during the pregnancy. Fifty-six (27.6%) first/birth fathers had a little involvement, while almost one-quarter (n=50, 24.6%) were very involved with the first/birth mother during the pregnancy. (See Figure 2).

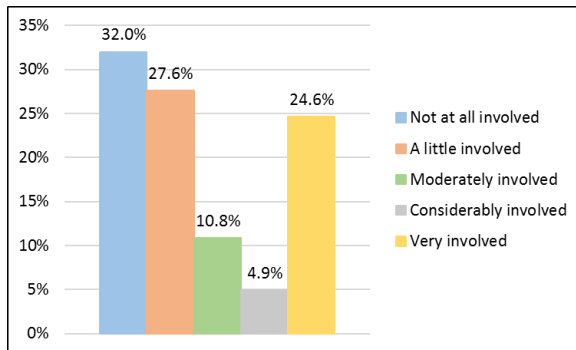


Figure 2 First/Birth Father Involvement During Pregnancy (n=203)

Prospective adoptive family involvement. Slightly more than one-quarter of the first/birth mothers reported they were “moderately” to “considerably involved” with the prospective adoptive family during their pregnancy (n=56, 27.8%). Little to no involvement was reported by 101 (45.3%) of the first/birth mothers. Seventeen (7.6%) first/birth mothers indicated contact was not applicable as they had not selected a prospective adoptive family during their pregnancy. (See Figure 3).

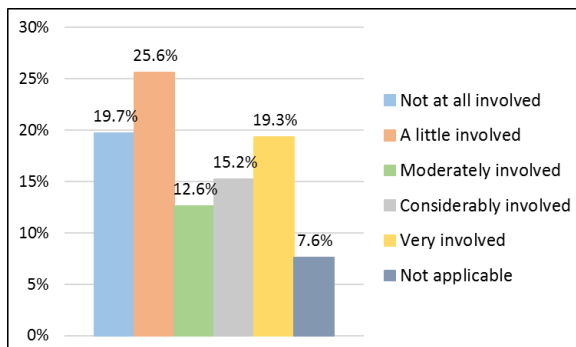


Figure 3 Involvement with Prospective Adoptive Family (n=223)

Type of contact with prospective adoptive family. The 162 first/birth mothers who had contact with their prospective adoptive family were asked to identify each type of contact they had. As shown in Figure 4, 83 (51.2%) reported contact through an external third party (e.g., adoption agency, attorney, facilitator). Phone calls (n=64, 39.5%) and face-to-face visits (n=63, 38.9%) were the next two common forms of contact identified. Six (3.7%) first/birth mothers marked the “other” category of contact and provided additional information about the form of contact: one reported the prospective adoptive family attended medical appointments; two (1.2%) indicated an existing relationship with the prospective adoptive family; and three (1.9%) reported that they lived with the prospective adoptive family for some duration of the pregnancy.

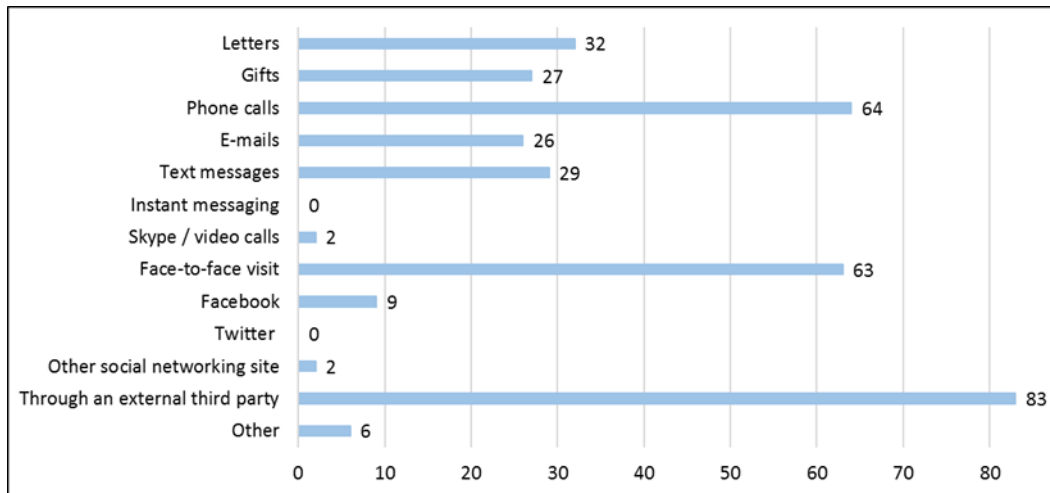


Figure 4 Types of Contact with Prospective Adoptive Family (n=162)

Frequency of contact. First/birth parents were asked to indicate the frequency of their contact with the prospective adoptive family during their pregnancy. Repeated contact, more than one meeting, with the prospective adoptive family was reported by the vast majority (n=155, 95.6%) of first/birth mothers. Of these 155 first/birth mothers, weekly or greater contact by prospective adoptive families was reported by 76 (46.9%). Among those who selected the “other” category, some reported changes in contact as the pregnancy progressed, from “daily for the last 6 weeks of pregnancy, none before then” to “We had monthly contact until the last month, as we were in different states.” (See Figure 5).

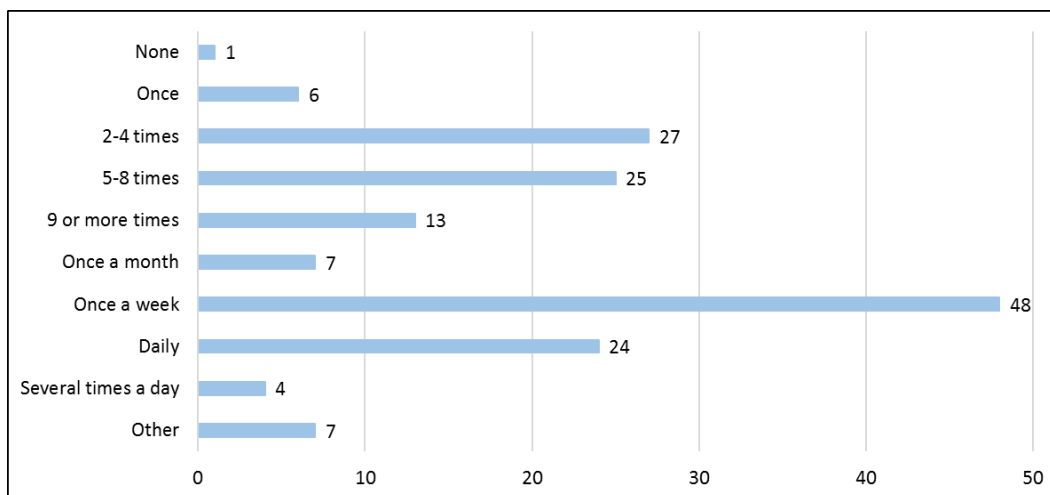


Figure 5 Frequency of Contact with Prospective Adoptive Family (n=162)

Satisfaction with contact. Of the 162 first/birth mothers who had contact with the prospective adoptive family, 158 ranked their satisfaction with the frequency of contact on a scale of 1 (extremely dissatisfied) to 10 (extremely satisfied). The mean satisfaction score was 7.51 (SD=2.84). The largest group of first/birth mothers (n=68, 43.0%) ranked their satisfaction with contact a 10, while 26 (16.5%) of the first/birth mothers who expressed some level of dissatisfaction with the frequency of contact; 20 (12.7%) reported they felt neutral about the frequency of contact.

Financial assistance/gifts from prospective adoptive family. First/birth mothers were asked if they received financial assistance/gifts from the prospective adoptive family. Slightly less than half (n=106, 47.5%) of the first/birth mothers reported they received no financial assistance/gifts; 93 (41.7%) first/birth mothers indicated they had received some type of financial assistance/gift. Five (2.2%) first/birth mothers reported they did not know/could not remember. This question was not applicable for the 19 (8.5%) first/birth mothers who did not select a prospective adoptive family during their pregnancy.

*Types of financial assistance/gifts received.*⁶ First/birth mothers who reported some form of financial assistance/gifts were asked to identify each type of assistance they received. Figure 6 shows the number of first/birth mothers who reported receiving each type of assistance. The most common form of assistance provided was for groceries (n=41, 44.1%). Utility assistance and rental assistance were each reported as a form of assistance by 37 (39.8%) of the first/birth mothers. Transportation expenses (n=18, 19.4%) and cellphone/phone expenses (n=19, 20.4%) were the least likely forms of assistance to be identified by the first/birth mothers. The “other” category was selected by 25 respondents (26.9%), who then provided additional information about the nature of the assistance. Twelve (12.9%) first/birth mothers indicated they received gifts such as art supplies, flowers, books, and dinners out. Additionally, four (4.3%) first/birth mothers indicated they received assistance with living expenses, three (3.2%) received money to replace lost wages, and three (3.2%) identified assistance to receive professional counseling.

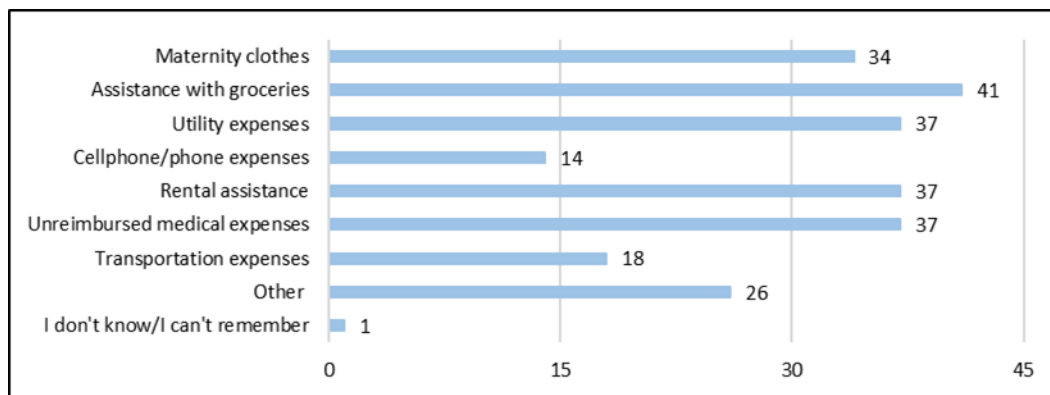


Figure 6 Type of Financial Assistance/Gifts Provided (n=93)

⁶ State laws vary regarding the type and nature of financial assistance an expectant mother can receive.

Information and Services Received

“I felt very deceived during my pregnancy. The agency I dealt with clearly had one agenda and that was to make the adoption happen. I was always treated as a birthmother and never was there any indication given to me that she was my child and that I had a right to consider parenting.”

—first/birth mother

Arranged Placement. Almost three-quarters (n=164, 73.5%) of first/birth mothers reported they received assistance with their child’s placement through a licensed adoption agency.⁷ Thirty-six (16.1%) worked with an independent attorney not affiliated with an adoption agency, while 12 (5.4%) reported a facilitator or intermediary introduced them to the adoptive parents. Eleven (4.9%) marked the “other” category. Of those 11 first/birth mothers, seven received assistance with their child’s placement from their own family members—predominantly their mothers. Two first/birth mothers indicated they selected the adoptive family themselves based on prior relationships, one reported the “adoptive parents had somebody,” and one stated “I had no assistance.” (See Figure 7.)

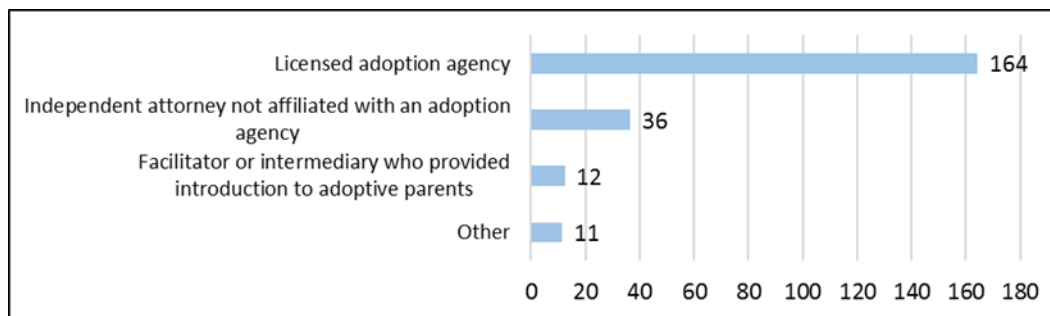


Figure 7 Arranged Adoption Placement (n=223)

Access to Sources of Information. First/birth mothers were asked to indicate if they had access to various types of information sources. Only one source of information, pamphlets/other written materials on adoption, was identified as accessible by more than half (n=142, 63.7%) of the first/birth mothers. Adoption-related websites (n=101, 45.3%), information from first/birth parents who had placed a child for adoption (n=98, 43.9%), and books on adoption (n=97, 43.5%) were the next most common of sources of information for which first/birth mothers had access. Information about parenting were some of the least accessible sources, including videos on parenting (n=42, 18.8%), information from first/birth parents who considered adoption but chose to parent (n=46, 20.6%), and parenting-related websites (n=61, 27.4%). (See Figure 8).

⁷ State laws vary from state to state regarding the entity a parent may use to plan an adoption.

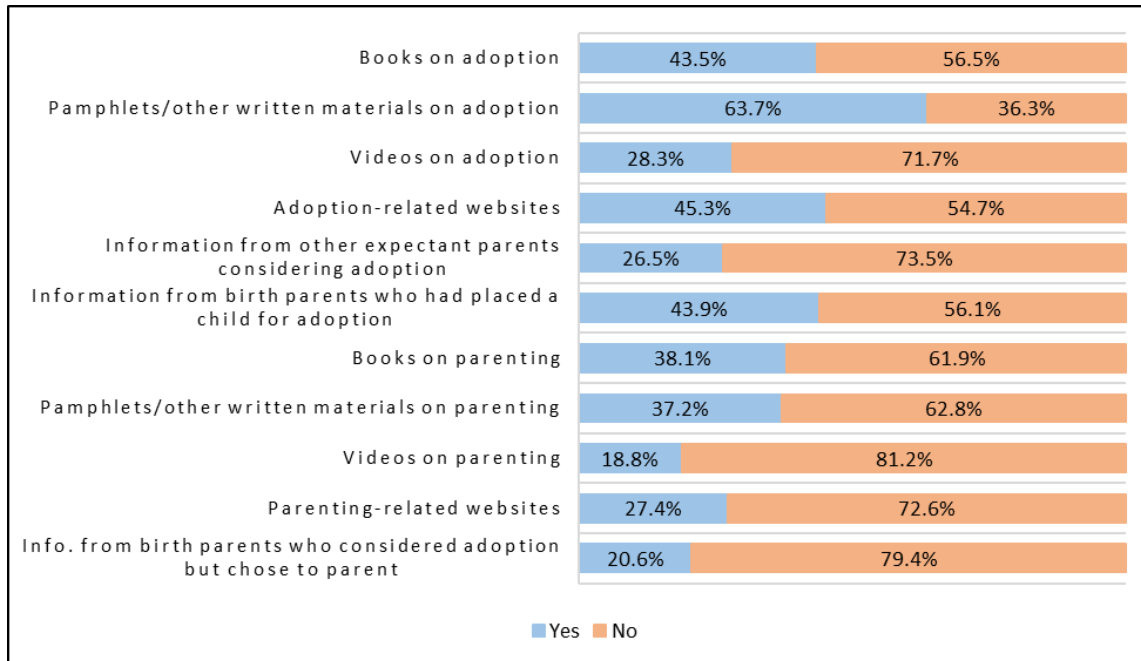
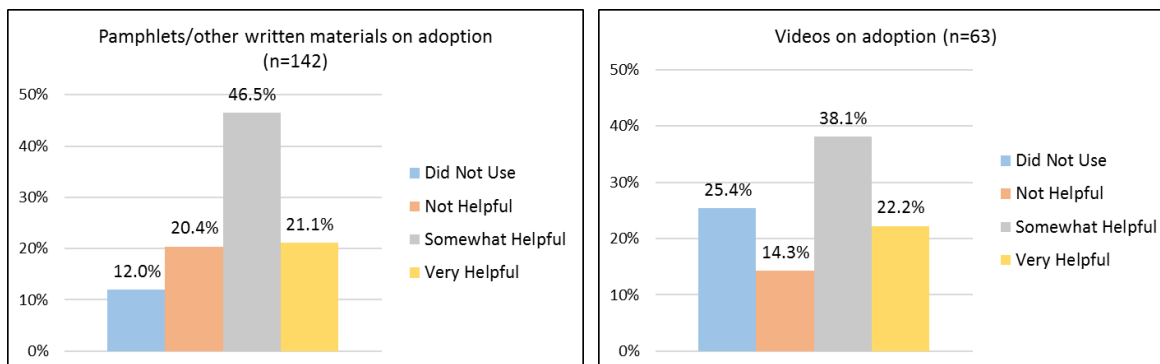


Figure 8 Access to Sources of Information (n=223)

Helpfulness of Information. Pamphlets and other written materials on adoption were the most common form of information available to first/birth parents (n=142). While nearly half (n=66, 46.5%) found the information somewhat helpful, first/birth mothers' responses were split between "very helpful" (n=30, 21.1%) and "not helpful" (n=29, 20.4%). The helpfulness of videos on adoption was also somewhat mixed. Of those who had access to videos, 24 (38.1%) reported they were "somewhat helpful," while 16 (25.4%) reported that they "did not use" the videos. Many first/birth parents found adoption related websites either "very helpful" (n=39, 38.6%) or "somewhat helpful" (n=37, 36.6%). Information from other expectant parents and first/birth parents appeared to be the most helpful resource for these first/birth parents. Information from other expectant parents considering adoption was reported to be "very helpful" by 21 (36.2%) first/birth parents and "somewhat helpful" by 27 (46.6%) of the first/birth parents who received this information. Furthermore, of the first/birth parents who received information from a first/birth parent who had placed a child for adoption, nearly half (n=77, 78.9%) reported the information "very helpful" or "somewhat helpful." A series of bar graphs (see Figure 9) illustrate how helpful first/birth mothers found the information they had access to regarding adoption and parenting.



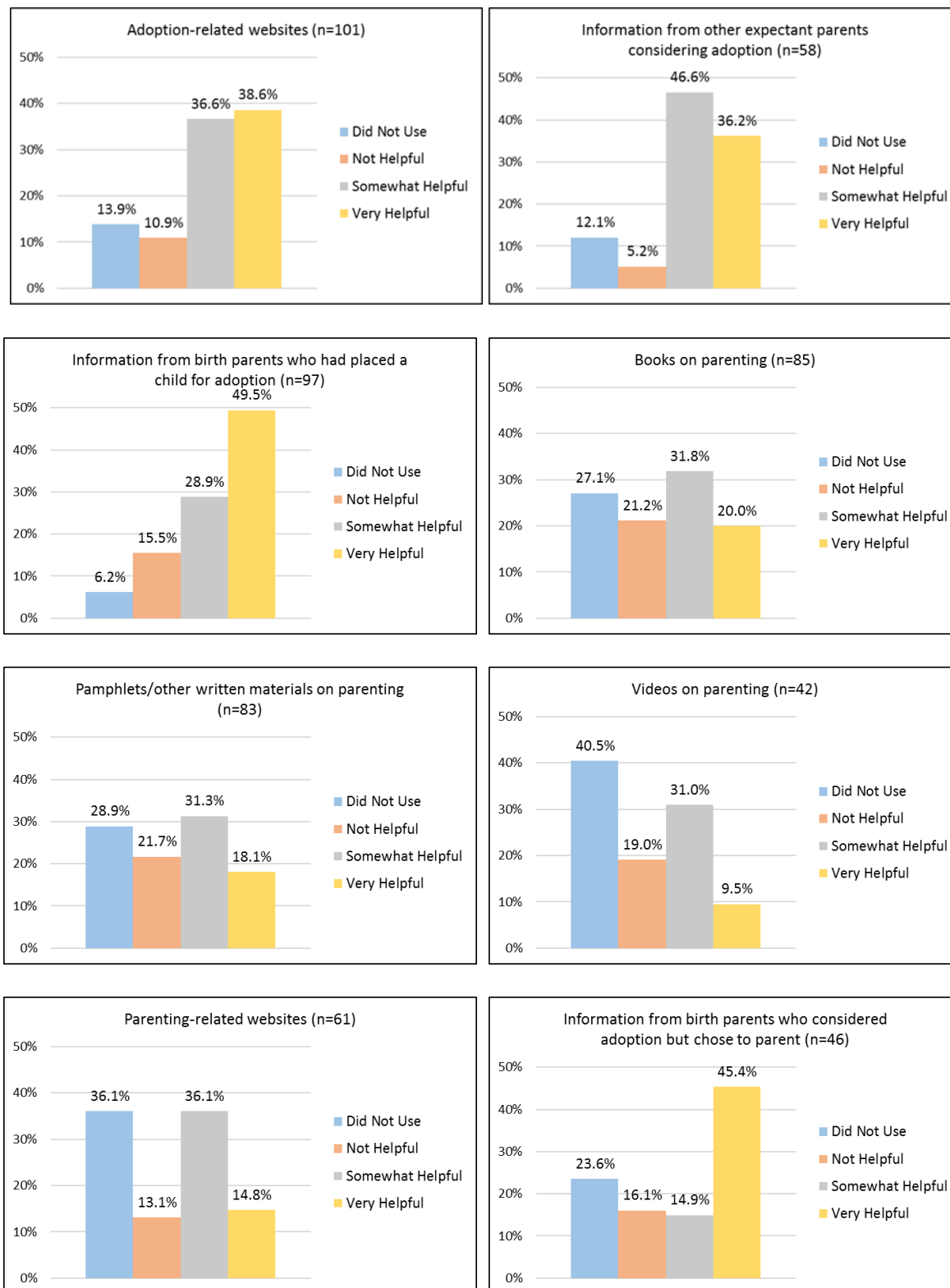


Figure 9 Helpfulness of Various Types of Information

Access to Services. First/birth mothers were asked to indicate if they had access to various services when contemplating their decision for their child. Two services, adoption agency professional/caseworker and prenatal care services, were identified as accessible by more than half of the first/birth mothers

(n=177, 79.4%; n=188, 84.3%, respectively). Three services were identified as accessible by less than a quarter of the first/birth mothers: an attorney just for the first/birth mother (n=43, 19.3%), a support group for expectant parents (n=43, 19.3%), and counseling services with an independent licensed practitioner (n=49, 22.0%). (See Figure 10).

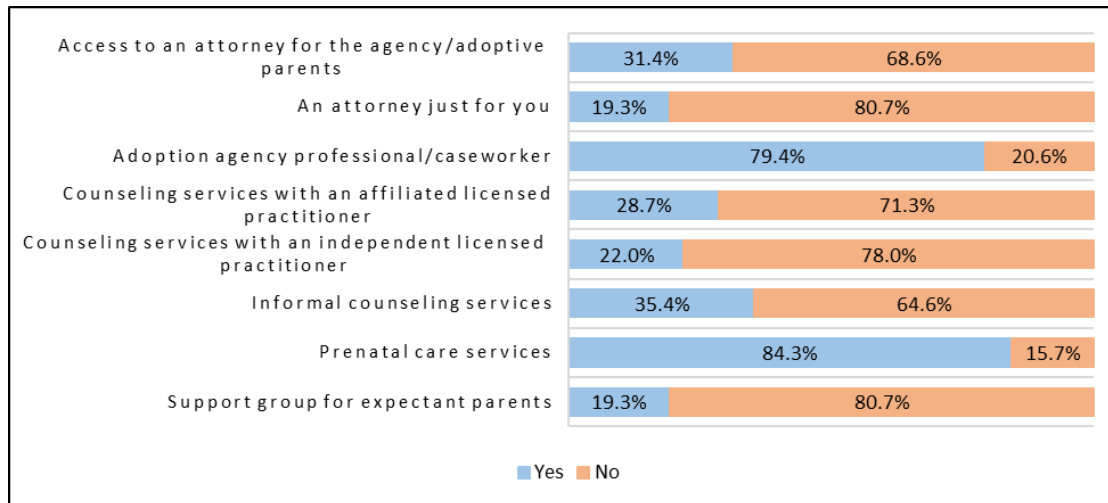


Figure 10 Access to Services (n=223)

Helpfulness of Information. For the various services that first/birth parents had access to, they were asked to indicate the overall helpfulness of the services when making their final decision. The usefulness of the services that first/birth mothers had access to is illustrated in a series of bar graphs (See Figure 11). Access to services in most cases was reported to be either “very helpful” or “somewhat helpful.” More than one-third of the first/birth parents who responded to this question reported that they “did not use” the attorney that was representing the agency/adoptive parents. For those who did utilize this service, access to an attorney representing the agency/adoptive parents was rated as “very helpful” by 21 (30%) first/birth mothers. Sixteen (22.9%) first/birth parents found this service “not helpful” while 8 (11.4%) found it “somewhat helpful.”

Among those who had access to counseling services, a majority (n=26, 56.5%) reported counseling services with an independent licensed practitioner were “very helpful.” Another 11 (23.9%) first/birth parents found them “somewhat helpful.” Four (8.7%) first/birth mothers found the service “not helpful” while five (10.9%) stated they “did not use” the service. Other services that were rated as “very helpful” include prenatal care services (n=98, 52.4%), informal counseling services (e.g., religious leader, teacher, mentor) (n=37, 48.1%), counseling services with an agency/attorney affiliated licensed practitioner (n=30, 46.9%), and support groups for expectant parents (n=20, 47.6%). Additionally, first/birth parents reported that having access to an adoption agency professional/caseworker was “very helpful” (n=79, 45.4%). Furthermore, 15 (34.9%) first/birth parents reported that having access to an attorney who represented just their interests was “very helpful.”

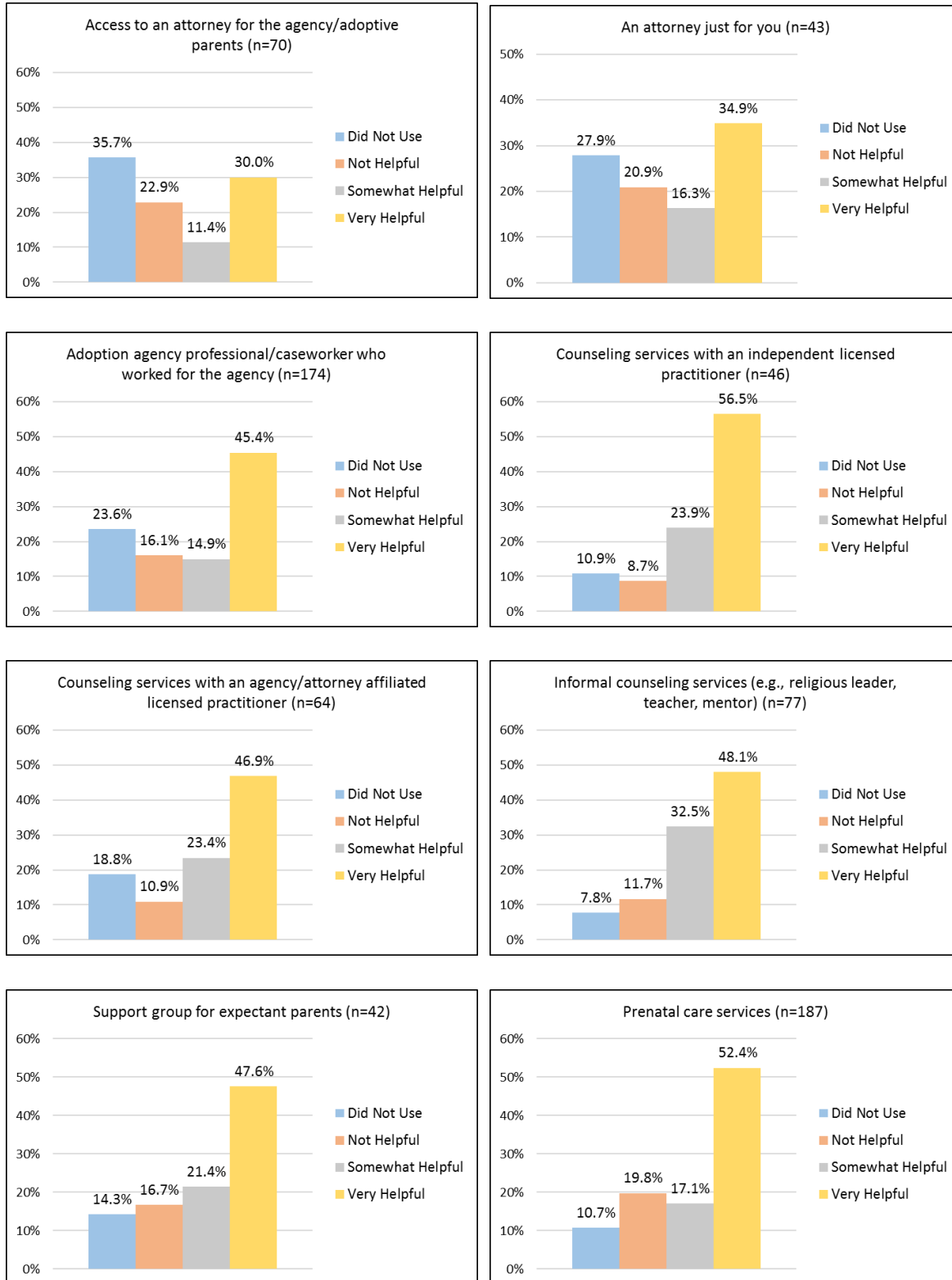


Figure 11 Helpfulness of Various Types of Services

Information from attorney. Eighty-four first/birth mothers reported about the information they received directly from their attorney. Respondents were asked to only include discussions that they had with a licensed attorney, rather than legal content learned from reading materials, videos, or discussion

with other individuals. In several areas, a sizeable majority of first/birth mothers reported not receiving different forms of information. Information about resources available to assist first/birth mothers should they desire to parent their child was not provided to nearly 8 out of 10 mothers (n=66, 78.6%). Nearly as many did not receive information about the implications associated with a decision to parent their child (n=58, 69.0%). Monetary rights, expectations, and responsibilities related to their child was not discussed with 53 (63.1%) of the first/birth mothers. Additionally, almost as many first/birth mothers reported that information about monetary expectations and responsibilities for the agency and/or prospective adoptive family was not discussed (n=52, 61.9%). More than half (n=52, 61.9%) of the first/birth mothers also reported they were not told about options for independent legal counsel to protect their best interests during the relinquishment process. In this same vein, various options available to first/birth mothers, including both parenting and adoption, were not discussed with 51 (60.7%) of the respondents. (See Figure 12).

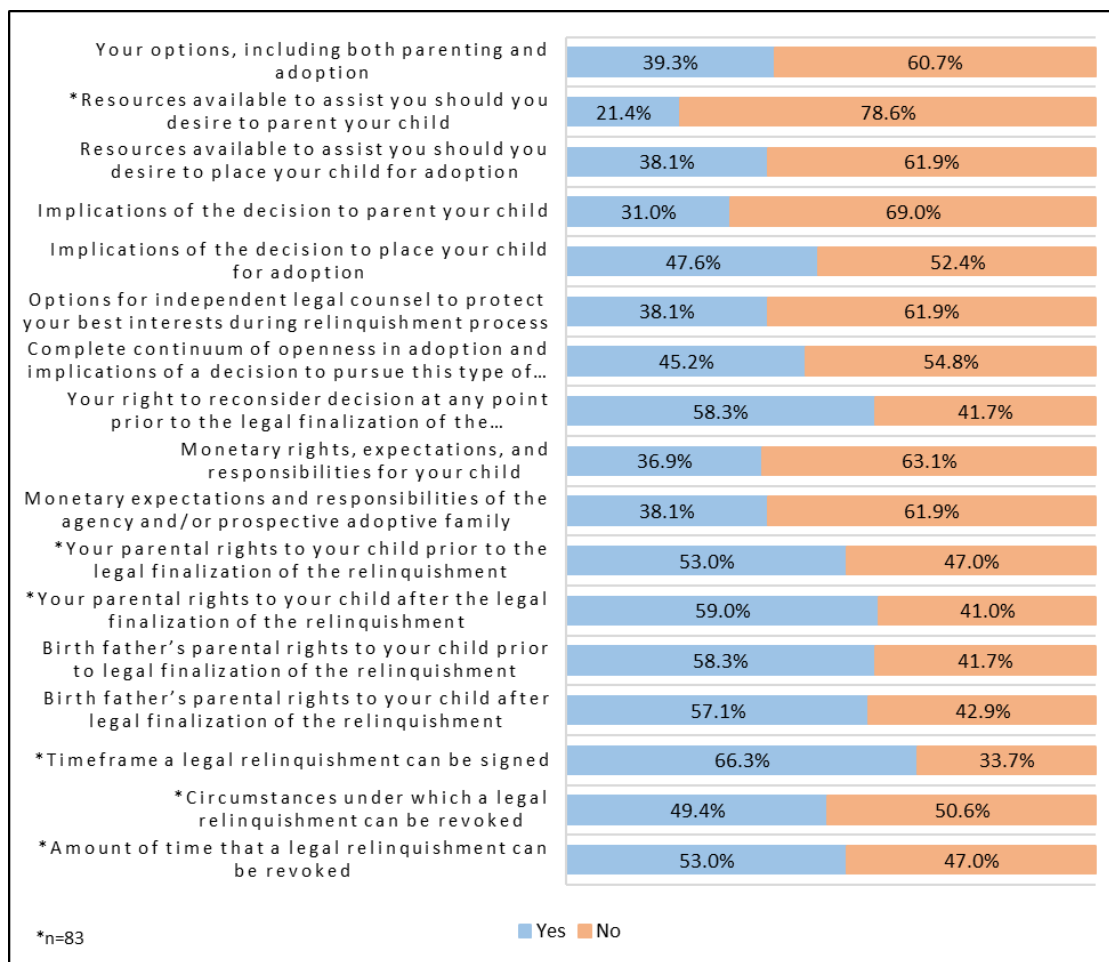


Figure 12 Information Received from Attorney (n=84)

Attorney as advocate. First/birth parents were asked to what extent they felt their attorney was an advocate for their interests in the situation. The largest single group felt that the attorney was not their advocate at all (n=32, 38.1%). However, just over one-quarter of first/birth mothers indicated that they felt their attorney advocated for them “a lot” (n=22, 26.2%). (See Figure 13).

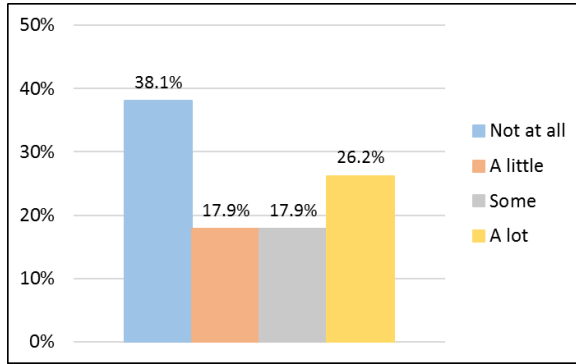


Figure 13 Attorney Was My Advocate (n=84)

Opportunities to speak with an attorney. Of the first/birth mothers who reported that they spoke with an attorney, just under half (n=40, 47.6%) reported they did not feel they had enough opportunities to speak with the attorney, while the remaining first/birth mothers (n=44; 52.4%) indicated they felt they had enough opportunities. Additionally, half of the first/birth mothers (n=42, 50.0%) reported that there was another person present when they met with the attorney.

Information from agency professional/caseworker. First/birth mothers (n=176) reported about the information they received from an agency professional/caseworker. Respondents were asked to only include discussions that they had with the agency professional/caseworkers with whom they worked, rather than content from reading materials, videos, or discussion with other individuals. First/birth mothers reported receiving a wide array of information from their agency professional/caseworker. Much of the information that first/birth mothers indicated that they received from agency professionals/caseworkers addressed various legal aspects of the process, including information concerning the timeframe in which a parental relinquishment papers could be signed (n=133, 76.9%); their parental rights to the child before (n=120, 69.9%) and after (n=121, 70.1%) the relinquishment papers were signed; their right to reconsider their decision at any time prior to the signing of the relinquishment (n=120, 69.5%), and the first/birth father's parental rights to the child prior to the relinquishment (n=119, 69.0%). Two-thirds (n=130, 75.0%) of first/birth mothers also reported that agency professionals/caseworkers discussed different community resources available in the event the mother opted to parent her child. (See Figure 14).

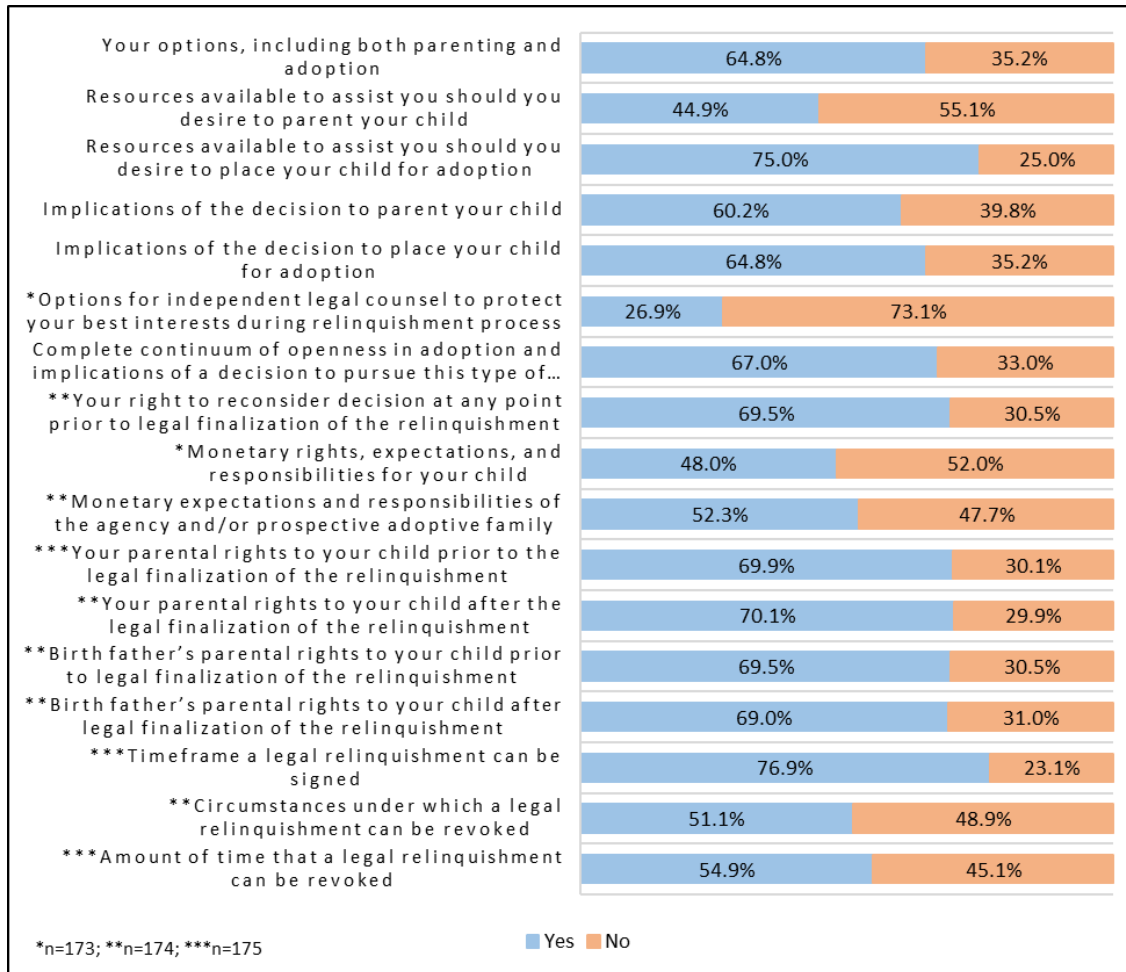


Figure 14 Information Received from Agency Professional/Caseworker (n=176)

Agency professional/caseworker as advocate. First/birth parents were asked to what extent they felt the agency professional/caseworker was an advocate for their interests in the situation. The largest single group felt that the agency professional/caseworker advocated for them “a lot” (n=73, 41.5%). However, 52 (29.5%) first/birth mothers reported feeling that the agency professional/caseworker did not advocate for their interests.

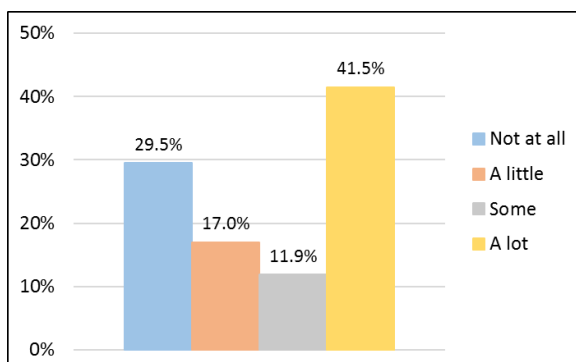


Figure 15 Agency Professional/Caseworker Was My Advocate (n=176)

Opportunities to speak with an agency professional/caseworker. Of the first/birth mothers who reported that they worked with an agency professional/caseworker, 105 (60%) reported that they felt they

had enough opportunities to speak with the agency professional/caseworker; 70 (40%) indicated they did not. Of the 64 first/birth mothers who responded, 40 (n=62.5%) reported that there was another individual present when they met with the agency professional/caseworker.

Information from counselor. Eighty-seven first/birth mothers reported about the information they received from a professional counselor. First/birth mothers were asked to only include discussions that they had with the counselor with whom they worked, rather than content from reading materials, videos, or discussion with other individuals. Of the 87 first/birth mothers who reported information they received from a professional counselor, 67 (78.2%) first/birth mothers reported that they received information about the full range of their options. Furthermore, 65 (74.7%) first/birth mothers reported that they received information about the implications of their decision to place their child, while slightly fewer received information about implications of parenting their child (n=60, 69.0%). An equal number of first/birth mothers reported also receiving information about resources available to assist them should they desire to parent their child (n=54, 62.1%), as well as information about the complete continuum of openness and the implications of a decision to pursue a placement of this type (n=54, 62.1%). With regard to information not received, 56 (64.4%) first/birth mothers reported they did not receive information about the circumstances under which legal relinquishment may be revoked. First/birth parents also indicated that they did not receive information about their options for independent legal counsel to protect their best interests during the relinquishment process. Fifty-four (62.1%) respondents reported this information was not addressed by their counselor. Other information that parents did not receive included: the amount of time that a legal relinquishment can be revoked (n=53, 60.9%) and topics relating to the first/birth parents' monetary obligations, rights, and responsibilities related to their child (n=50, 58.6%) or those of the adoption agency and/or the adoptive parents (n=49, 56.3%). (See Figure 16).

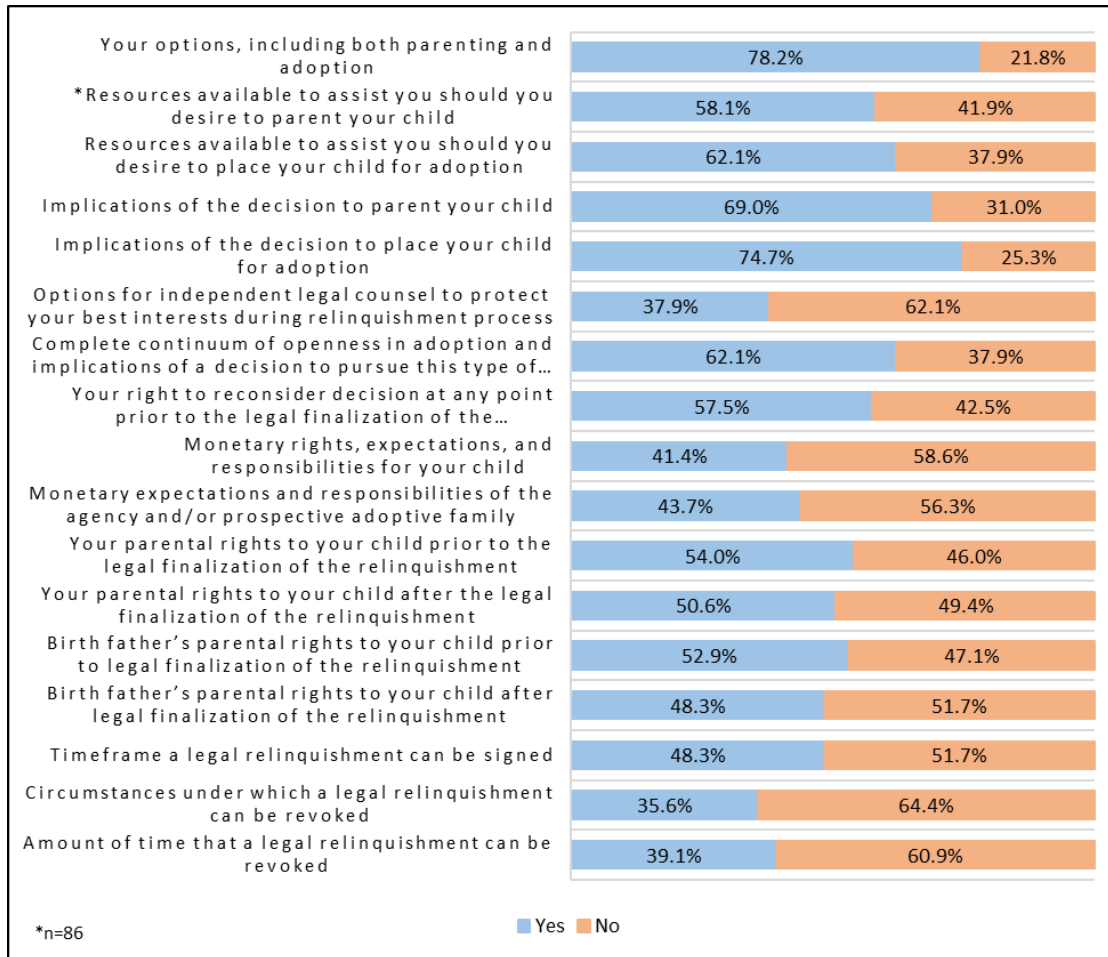


Figure 16 Information Received from Counselor (n=87)

Counselor as advocate. First/birth parents were asked to what extent they felt their counselor was an advocate for their interests in the situation. Of the 88 respondents to this question, half reported they felt their counselor advocated for them “a lot” (n=44, 50.0%) while 16 (18.2%) of first/birth mothers reported feeling that the counselor did not advocate for them at all. (See Figure 17.)

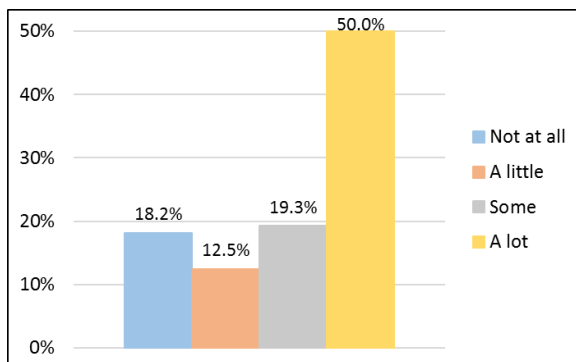


Figure 17 Counselor Was My Advocate (n=88)

Opportunities to speak with counselor. Of the 88 first/birth mothers who reported that they worked with a counselor, 61 (69.3%) reported that they felt they had enough opportunities to speak with the

counselor; 27 (30.7%) indicated they did not. Sixteen (18.2%) reported that there was another individual present when they met with the counselor.

Support While Making a Decision

“It was a confusing time. I did all the wrong things, but it was no one’s fault. I needed someone to help me realize I could do it and have the courage and have the help. Without that I guess I turned against myself. No one did anything wrong. But I just didn’t have someone who said its okay to keep him and I’ll help you.”

—first/birth mother

Availability of support. First/birth mothers were asked to assess the different types of support with which they had access when making their decision. Mothers were asked to respond using a seven-point Likert scale to rate the support they had available (See Table 3). Responses ranged from “very strongly disagree” (i.e., no support available) to very “strongly agree” (i.e., significant support available). Lack of support from family was an area of significant concern for many first/birth mothers. Over half (n=125, 56.1%) of first/birth mothers reported either “very strongly disagreed” or “strongly disagreed” that they could talk about their problems with their family. Additionally, 120 (53.7%) first/birth mothers “very strongly disagreed” or “strongly disagreed” that they get emotional help from their family. First/birth mothers reported similar trends regarding the lack of support from friends. Eighty-six (38.6%) indicated that they “very strongly disagreed” or “strongly disagreed” that they could count on friends when things went wrong. While many first/birth parents indicated a lack of support from family and/or friends, 92 (41.3%) respondents either “strongly agreed” or “very strongly agreed” that they had at least one special person in their life who was around when they were in need. A similarly high number also “strongly agreed” or “very strongly agreed” that they had access to at least one person who was a real source of comfort to them during this time (n=83, 37.2%) and/or access to someone with whom they could share their joy and sorrows (n=82, 36.8%).

Table 3 Support Available When Making a Decision about Placing Child for Adoption (n=223)

Variable	Very Strongly Disagree	Strongly Disagree	Mildly Disagree	Neither Agree nor Disagree	Mildly Agree	Strongly Agree	Very Strongly Agree
	Freq (%)	Freq (%)	Freq (%)	Freq (%)	Freq (%)	Freq (%)	Freq (%)
There was a special person who was around when I was in need	54 (24.2)	24 (10.8)	11 (4.9)	13 (5.8)	29 (13.0)	46 (20.6)	46 (20.6)
There was a special person with whom I could share joys and sorrows	57 (25.6)	25 (11.2)	13 (5.8)	17 (7.6)	29 (13.0)	33 (14.8)	49 (22.0)
My family really tried to help me	78 (35.0)	24 (10.8)	17 (7.6)	18 (8.1)	28 (12.6)	24 (10.8)	34 (15.2)
I got the emotional help & support I needed from my family	88 (39.5)	32 (14.2)	15 (6.7)	20 (9.0)	25 (11.2)	19 (8.5)	24 (10.8)
I had a special person who	61 (27.4)	15 (6.7)	12 (5.4)	15 (6.7)	37 (16.6)	38 (17.0)	45 (20.2)

was a real source of comfort to me							
My friends really tried to help me	59 (26.5)	20 (9.0)	28 (12.6)	22 (9.9)	43 (19.3)	26 (11.7)	25 (11.2)
I could count on my friends when things went wrong	61 (27.4)	25 (11.2)	36 (16.1)	25 (11.2)	34 (15.2)	22 (9.9)	20 (9.0)
I could talk about my problems with my family	97 (43.5)	28 (12.6)	23 (10.3)	14 (6.3)	24 (10.8)	16 (7.2)	21 (9.4)
I had friends with whom I could share my joys and sorrows	53 (23.8)	26 (11.7)	23 (10.3)	17 (7.6)	50 (22.4)	28 (12.6)	26 (11.7)
There was a special person in my life who cared about my feelings	56 (25.1)	16 (7.2)	14 (6.3)	15 (6.7)	36 (16.1)	35 (15.7)	51 (22.9)
My family was willing to help me make decisions	81 (36.3)	25 (11.2)	16 (7.2)	26 (11.7)	24 (10.8)	16 (7.2)	35 (15.7)
I could talk about my problems with my friends	59 (26.5)	22 (9.9)	31 (13.9)	20 (9.0)	37 (16.6)	27 (12.1)	27 (12.1)

Note: Percentages may not add to 100% due to rounding.

The Decision Process

“Having to make the decision to rip my heart out and give up my child for adoption is the hardest, most traumatic experience I ever went through and continue to go through. I had no idea that you don't just give up your child once, it's as though you're giving him/her up every single day because every day I have to live with the hole inside me, feeling incomplete.” –first/birth mother

First/birth mother demographics at the time of relinquishment. First/birth mothers were asked a series of questions about their circumstances at the time that they signed a relinquishment for parental rights for their child. First/birth mothers were an average of 22.6 years old (SD=5.85) at the time of the relinquishment. Ninety-nine first/birth mothers (n=44.4%) reported having a high school diploma/GED or less at the time of their relinquishment and almost one-third (n=73, 32.7%) reported that they had some college or an Associate's degree. Thirty first/birth mothers (13.5%) reported having a college degree or higher at the time of their relinquishment. With regard to relationship status, the vast majority of first/birth mothers (n=151; 67.7%) reported being single at the time of their relinquishment, followed by living with a partner (n=39, 17.5%). The remaining first/birth mothers reported being married (n=9, 4.0%), divorced (n=8, 3.6%), separated (n=5, 2.2%), or “other” (n=11, 4.9%). Almost two-thirds of respondents (140, 62.8%) reported living with a relative (n=92, 41.3%) or on their own/with a roommate (n=48, 21.5%) at the time of the relinquishment. A small proportion of first/birth mothers reported living with a “host” family that was sponsored by the agency or their attorney (n=7, 3.1%), living in a maternity home (n=6, 2.7%), or living with the prospective adoptive family (n=3, 1.3%).

Slightly less than one-third (n=68, 30.5%) of first/birth mothers reported that they experienced mental health issues at the time of their relinquishment. Additionally, a small proportion (n=14, 6.3%) of first/birth

mothers in the sample reported experiencing some substance abuse or addiction issues at that time of their lives. (See Table 4).

Table 4 First/birth Mother Demographics at Time of Relinquishment (n=223)

Variable	Mean	SD
Age at Relinquishment (Years)	22.63	5.85
Variable	Frequency	Percent
Education		
Less than high-school	36	16.1
High-school graduate or GED	63	28.3
Some vocational/technical training (after high school)	7	3.1
Completed vocational/technical training (after high school)	14	6.3
Some college/A.A. degree	73	32.7
Completed bachelor's degree	19	8.5
Some graduate training beyond a bachelor's degree	6	2.7
Completed master's degree	4	1.8
Some graduate training beyond a master's degree	0	0
Completed doctoral degree or other professional degree (e.g., Ph.D., DDS, JD, MD, etc.)	1	.4
Relationship Status		
Single	151	67.7
Living with partner	39	17.5
Married	9	4.0
Separated	5	2.2
Divorced	8	3.6
Other	11	4.9
Living Arrangements		
Lived alone or with a roommate (non-romantic)	48	21.5
Lived with a spouse or significant other	44	19.7
Lived with my children	22	9.9
Lived with a relative (including parents)	92	41.3
Lived with the prospective adoptive family for my child	3	1.3
Lived in a maternity home	6	2.7
Lived with a "host" family – sponsored by the agency or an attorney	7	3.1
I don't know/I can't remember	1	.4
Mental health issues		
Yes	68	30.5
No	115	51.6
Maybe/I'm not sure	40	17.9
Substance abuse or addiction issues		
Yes	14	6.3
No	206	92.4
Maybe/I'm not sure	3	1.3

Note: Percentages may not add to 100% due to rounding.

Consideration of adoption. First/birth mothers were asked when during the process they first considered placing their child for adoption. Ninety (40.3%) first/birth mothers considered adoption as soon as they learned they were pregnant; another 89 (39.9%) considered adoption a few months after they found out they were pregnant. Five (2.2%) first/birth mothers contemplated adoption immediately after the baby's birth. (See Figure 18).

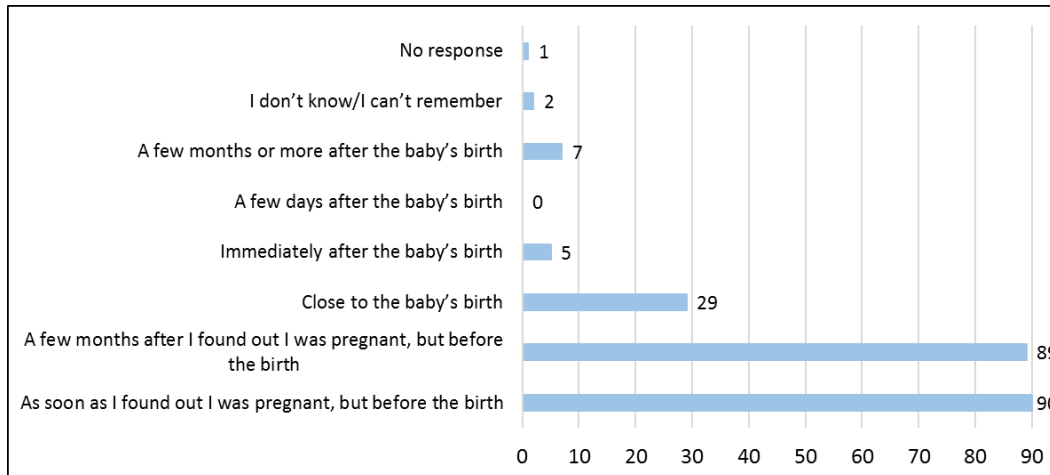


Figure 18 First Considered Adoption (n=223)

Options considered. First/birth mothers were asked about the different options that they considered during their decision making process. Approximately one-third (n=70, 31.4%) of first/birth mothers reported they did not strongly consider any other option for their child other than adoption. The 153 first/birth mothers who considered other options were asked to identify alternatives that were considered. (See Figure 19). An overwhelming majority (n=134, 87.6%) of first/birth mothers reported that they considered parenting their child. The next most common responses were termination of the pregnancy (n=60, 39.2%) and “marrying my child’s birth father and raising the child” (n=34, 22.2%). The one first/birth mother (<1%) who identified “other” reported that she had a “forced adoption after termination of pregnancy did not happen.”

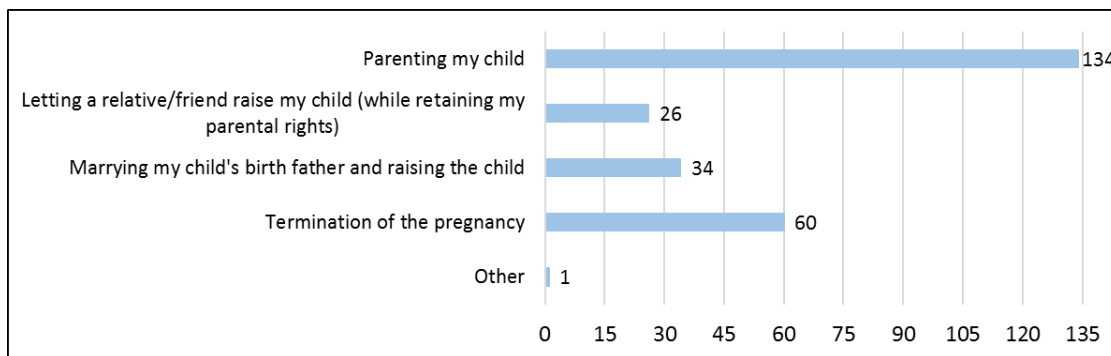


Figure 19 Options Other Than Adoption Considered (n=153)

Decision making process. First/birth mothers were asked a series of questions about their decision making process. Responses for these questions were fairly evenly split. First/birth mothers were asked if they felt like they had enough opportunities to talk through their decision with others. About half (n=113, 50.7%) reported “no” to this question. When asked if they were provided with enough information about different options for their child by the various parties involved in their situation, slightly more than half (n=117, 52.5%) reported “no”. (See Table 5).

Table 5 Questions Regarding Decision Making (n=223)

Questions	Yes Freq (%)	No Freq (%)
Do you feel you had enough opportunities to talk about your decision with someone?	110 (49.3)	113 (50.7)
Do you feel that you were provided enough information about the options for your child (e.g., parenting and adoption) by the different parties involved?	106 (47.5)	117 (52.5)

Additional information would have liked to know. First/birth mothers were asked what information they would have liked to know more about. A majority (n=100; 85.4%) of first/birth mothers indicated that they would have liked to have known more about parenting resources available to assist them should they opt to parent their child. Additionally, 91 (77.8%) first/birth mothers reported that they would like to have known more about the implications of their decision to place their child for adoption. Eighty-two (70.1%) first/birth mothers reported that they would like to have known more about their options for legal independent counsel to protect their interests during the relinquishment process. Finally, 77 (65.8%) first/birth mothers indicated a desire for additional information about the complete continuum of openness and all the implications associated with this type of adoption. (See Figure 20.)

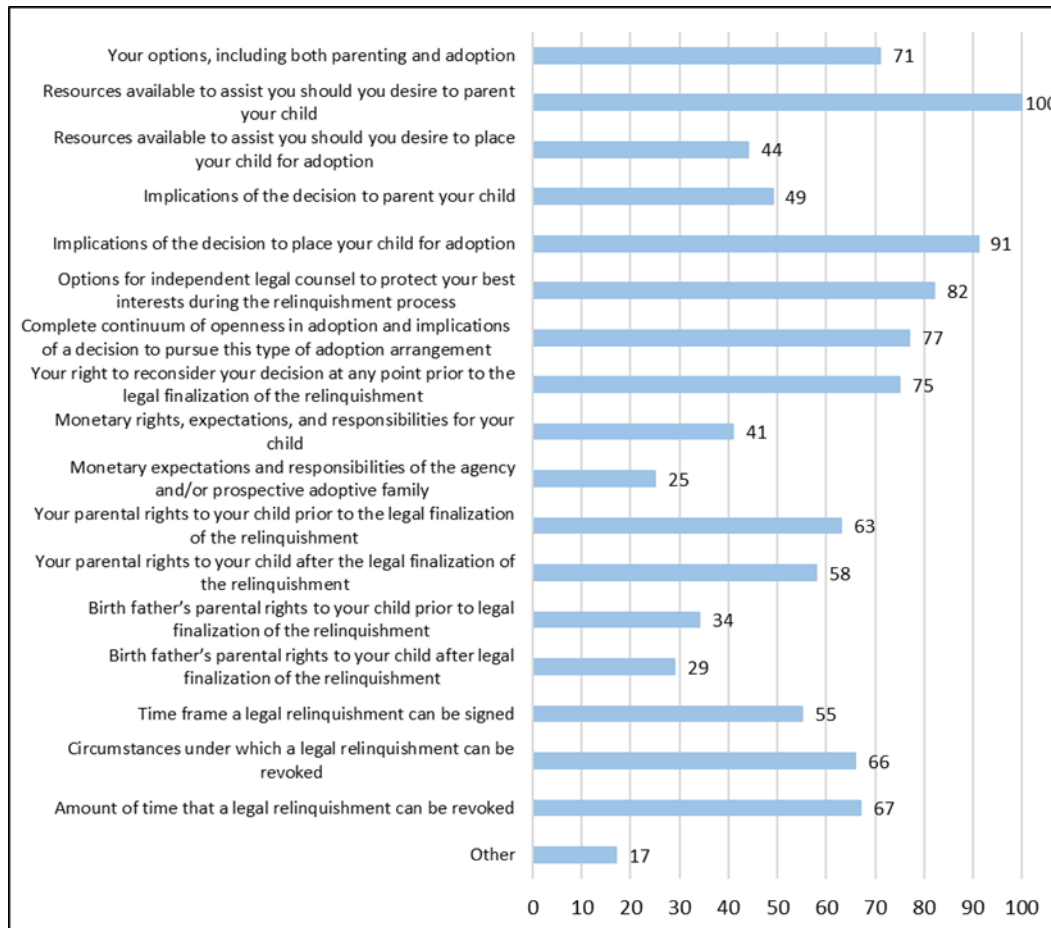


Figure 20 Would Have Wanted More information About (n=117)

Sources of pressure in the decision making process. First/birth mothers were asked if at any point in their decision making process whether they felt pressured to place their child for adoption. Slightly more than half of first/birth mothers (n=117, 52.5%) responded in the affirmative. When asked who or what

pressured them to place their child for adoption, the most common responses included: “my immediate family members” (n=74, 63.2%), “my financial circumstances” (n=70, 59.8%), “my housing situation at the time” (n=50, 42.7%) and “my child’s birth father” (n=45, 38.5%). (See Figure 21).

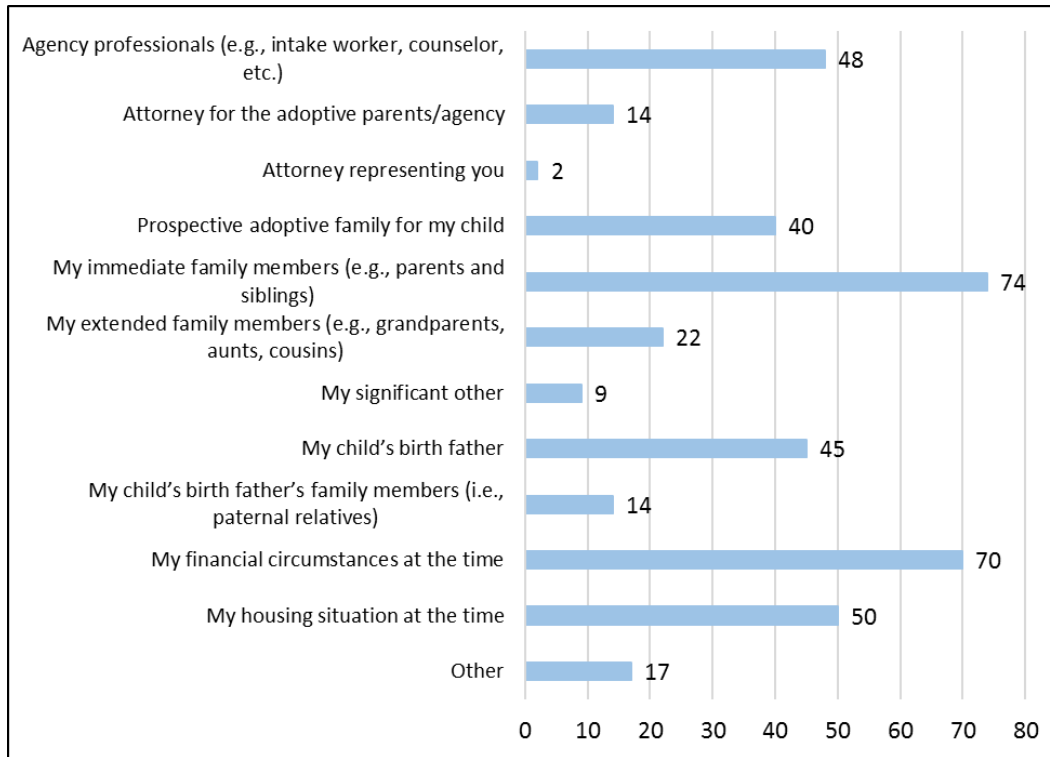


Figure 21 Pressured First/Birth Mother During the Decision Making Process (n=117)

Ways first/birth mothers felt pressured. On hundred and fifteen of the 117 first/birth mothers who indicated that they felt pressured to place their child for adoption provided additional information about the various ways in which they felt pressured. Almost two-thirds (n=84, 73.0%) of first/birth mothers reported concerns about possible loss of emotional or social support. First/birth mothers also expressed concerns about possible loss of financial support (n=66, 57.4%) and possible loss of their housing (n=64, 55.7%). In the “other” category, 10 (8.7%) explicitly stated hurting or disappointing the adoptive family as a form of pressure and four (3.5%) respondents identified religious beliefs. (See Figure 22).

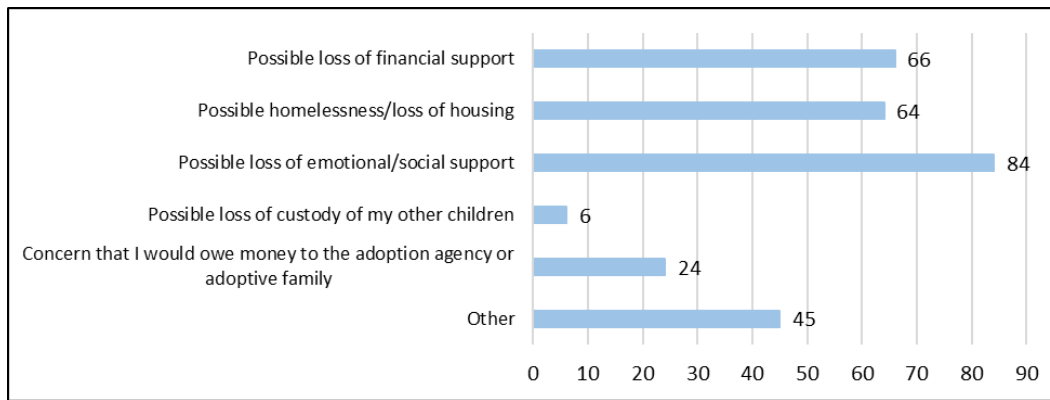


Figure 22 Ways that First/Birth Mothers Felt Pressure (n=115)

Influences on decision. First/birth mothers were asked to rate the influence of various individuals on their decision to place their child for adoption. (See Table 6). More than half mothers (n=122, 54.8%) of first/birth reported that their parents either had “some” or “a lot” of influence on their decision to place their child. Almost half (n=110, 49.4%) of first/birth mothers reported that the prospective adoptive family had “some” or “a lot” of influence on their decision. Additionally, the child’s birth father appeared to be very influential in the decision making process for many first/birth mothers. One-hundred and eight (48.4%) first/birth mothers reported that the child’s fathers had “some” or “a lot” of influence on their decision.

Table 6 Influence of Individuals in Decision (n=223)

	Not at all	A little	Some	A lot	N/A
	Freq (%)	Freq (%)	Freq (%)	Freq (%)	Freq (%)
My parents	55 (24.7)	20 (9.0)	28 (12.6)	94 (42.2)	26 (11.7)
My other family members	88 (39.5)	32 (14.3)	32 (14.3)	35 (15.7)	36 (16.1)
My friends	108 (48.4)	40 (17.9)	25 (11.2)	12 (5.4)	38 (17.0)
My child’s birth father	66 (29.6)	19 (8.5)	27 (12.1)	81 (36.3)	30 (13.5)
My child’s birth father’s family (i.e., paternal relatives)	95 (42.6)	13 (5.8)	14 (6.3)	27 (12.1)	74 (33.2)
The prospective adoptive family for my child	53 (23.8)	27 (12.1)	30 (13.5)	80 (35.9)	33 (14.8)
Adoption agency professionals	49 (22.0)	36 (16.1)	31 (13.9)	69 (30.9)	38 (17.0)
My attorney	41 (18.4)	8 (3.6)	7 (3.1)	9 (4.0)	158 (70.9)
Attorney for the agency/adoptive parents	48 (21.5)	11 (4.9)	14 (6.3)	16 (7.2)	134 (60.1)
Professional counselor	44 (19.7)	12 (5.4)	24 (10.8)	27 (12.1)	116 (52.0)
Other individual [please specify]	13 (5.8)	1 (.4)	6 (2.7)	20 (9.0)	183 (82.1)

Involvement in selection of adoptive family. First/birth mothers were asked the extent of their involvement in the selection of the adoptive family for their child. The majority (n=182, 81.6%) of the sample reported that they were either “considerably involved” or “very involved” in the selection of their child’s adoptive family. Fourteen (6.3%) first/birth mothers reported that they were “not at all involved” in the selection of the adoptive family. (See Figure 23). As shown in Table 7, when asked whether they had a prior relationship with the prospective adoptive family for their child, the vast majority (n=179, 80.3%) of first/birth mothers reported that they did not have a prior relationship. Fifteen (6.7%) reported having a prior friendship with their child’s prospective adoptive family.

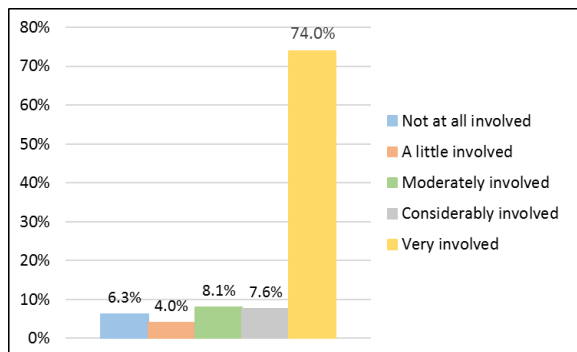


Figure 23 Involvement in Selection of Adoptive Family (n=223)

Table 7 Relationship with Prospective Adoptive Family (n=223)

	Frequency	Percent
Friend	15	6.7
My child's birth father's relative (i.e., paternal relative)	1	.4
My relative	6	2.7
No relation, I did not have a prior relationship with the family	179	80.3
Not applicable – I did not select a family for my child	8	3.6
Other	14	6.3

The Relinquishment Process

“My decision to place my child was one where I did the best I could with the resources I was given. I am a firm believer that should I have been given other options and hope regarding parenting him (the ability to graduate from high school and complete college AND not feeling like my father was going to disown me), I would have been brave enough to parent him. The situation felt hopeless and like adoption was my only option.” –first/birth mother

Relinquishment of parental rights. First/birth mothers were asked when they signed the document to relinquish their parental rights. Almost one-third (n=70, 31.4%) of first/birth mothers reported that they signed relinquishment papers within 1-2 days after the birth of their child. Sixty-one (27.4%) signed the papers seven or more days after the birth. In contrast, nine (4.0%) signed relinquishment papers while pregnant, and 15 (6.7%) signed papers within a few hours of their child's birth. (See Table 8.)

Table 8 When Relinquishment Papers Were Signed (n=223)

	Frequency	Percent
While pregnant	9	4.0
Within a few hours after the birth of my child	15	6.7
1-2 days after the birth of my child	70	31.4
3-4 days after the birth of my child	49	22.0
5-6 days after the birth of my child	9	4.0
7 or more days after the birth of my child	61	27.4
I don't know/I can't remember	10	4.5

Location of the relinquishment. Relinquishment papers were most commonly signed in the hospital (n=91, 40.8%), followed by an agency or other office setting (n=57, 25.6%). Twenty-two (9.9%) first/birth mothers selected “other” location, including restaurants (n=8, 3.6%) and hotel rooms, (n=4, 1.8%). (See Figure 24).

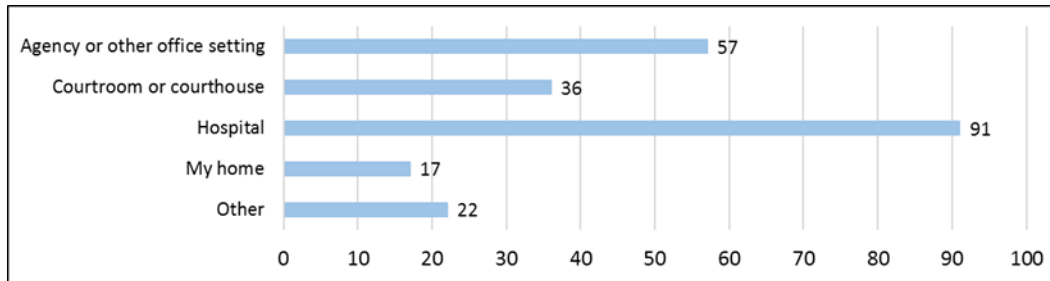


Figure 24 Location Where Relinquishment Papers Signed (n=223)

Time to review relinquishment papers. First/birth parents were asked if they believed they had sufficient time to review the relinquishment of parental rights document(s) prior to signing. Of the 222 participants who responded to the question, 86 (38.7%) reported they did not have sufficient time to review documents while the remaining 136 (61.3%) indicated they felt they had sufficient time to review relinquishment documents.

Reasons for relinquishment. Respondents were asked to select all of the reasons they had for relinquishing their parental rights to their child for adoption. The most common reasons selected included “financial concerns” (n=183, 82.1%), their “relationship status” with the child’s father (n=133, 59.6%), “lack of social support” (n=114, 51.1%), and “felt unprepared to be a parent” (n=113, 50.7%). Almost one-quarter (n=52, 23.3%) of the first/birth mothers reported experiencing “pressure from adoption professionals.” (See Figure 25.)

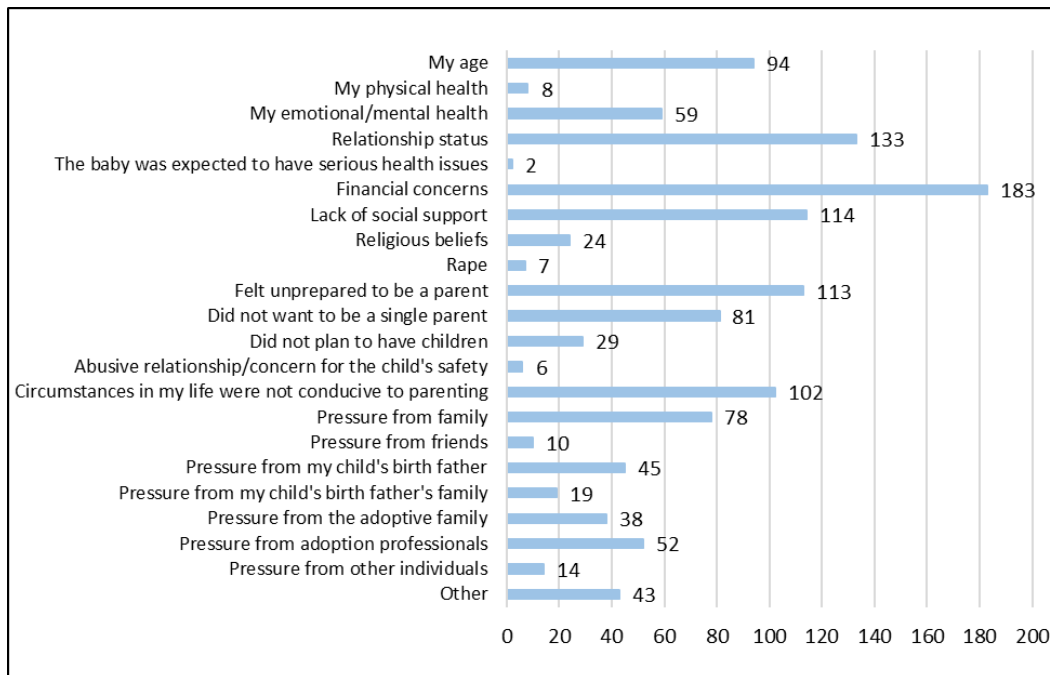


Figure 25 Reasons for Relinquishing (n=223)

Primary reason for relinquishment. First/birth mothers were asked to identify the primary reason for their decision to relinquish their parental rights to their child for adoption. (See Figure 26). An overwhelming majority (n=183, 82.1%) of first/birth mothers reported that the primary reason that they relinquished their parental rights to their child related to concerns about finances. The next most frequent reasons selected included “felt unprepared to be a parent” (n=36, 16.1%) and the “circumstances in my life

were not conducive to parenting” (n=34, 15.2%). Twenty-nine (13%) first/birth mothers reported that the primary reason they made the decision to relinquish was pressure from family members.

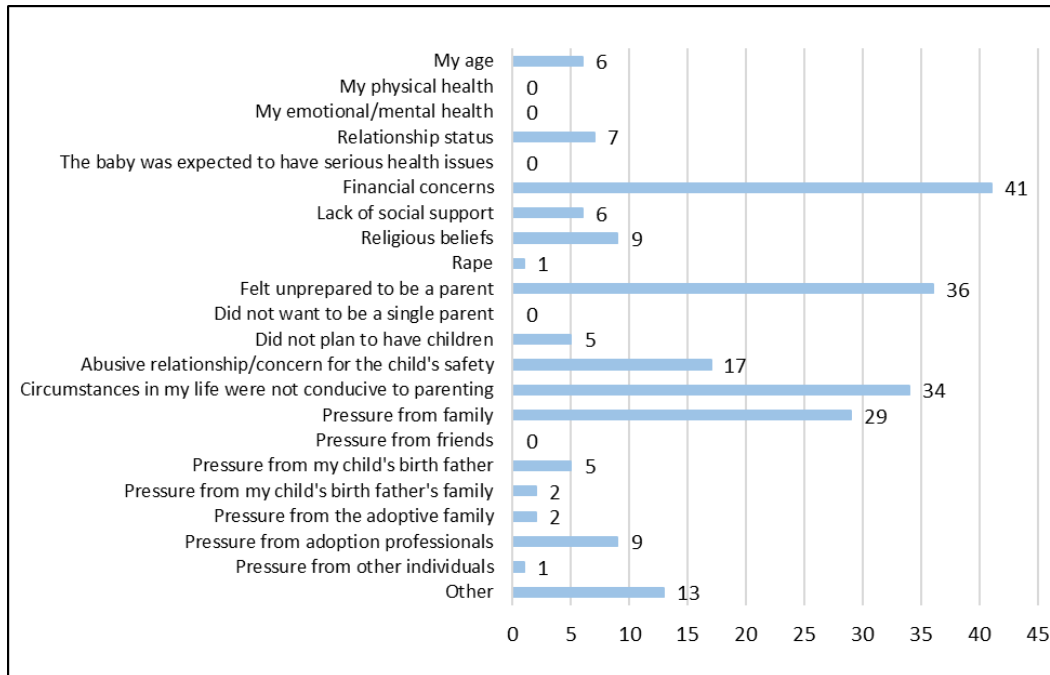


Figure 26 Primary Reason for Relinquishment (n=223)

Extent to which decision was based on own wishes. First/birth mothers were asked the extent to which their decision to relinquish was based on their own wishes. Almost one-fourth (n=54, 24.3%) of first/birth mothers reported that the decision was “not at all” based on their wishes. Seventy-three (32.9%) first/birth mothers indicated that the decision was based either “a little” or “some” on their wishes. The greatest proportion of respondents (n=95, 42.8%) reported that the decision was based “a lot” on their own wishes for the situation. (See Figure 27).

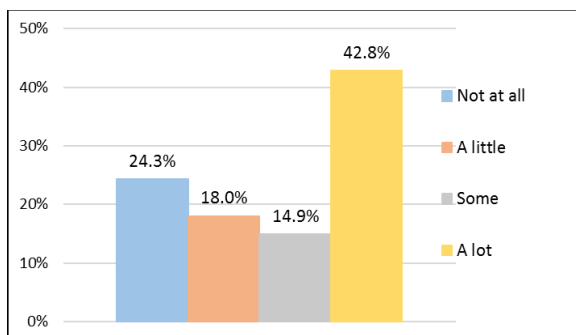


Figure 27 Decision to Relinquish Based on Own Wishes (n=222)

Satisfaction with decision. Using a five-point Likert scale, first/birth mothers were asked to rank their satisfaction with the decision to relinquish their parental rights to their child for adoption. As indicated in Figure 28, slightly less than half (n=103, 46.2%) reported that they were either “very satisfied” or “satisfied” with the decision. Fifty (20.2%) first/birth mothers reported having “mixed/ambivalent” feelings about the decision to relinquish their child, while the remaining 75 (33.6%) first/birth mothers reported feeling “dissatisfied” or “very dissatisfied.”

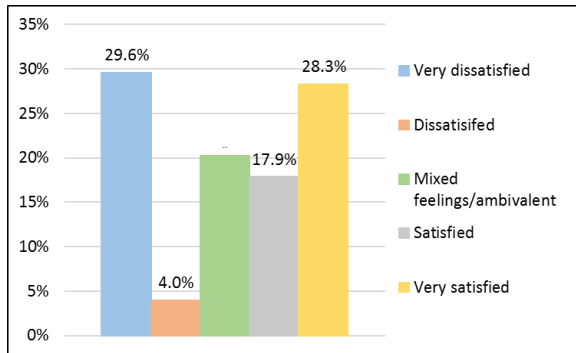


Figure 28 Satisfaction with Decision to Relinquish (n=223)

First/birth mothers were asked a follow-up question to understand if they have ever regretted their decision to relinquish their parental rights to their child for adoption. Almost half (46.2%) reported that they have regretted their decision in some capacity. Sixty-four (28.7%) first/birth mothers indicated that they have not ever regretted their decision to relinquish their parental rights to their child for adoption.

Adjustment to decision. When asked how well they have adjusted to their decision to relinquish their child, a majority (n=134, 60.1%) of first/birth mothers reported “very well” or “somewhat well.” Twenty-four (10.8%) first/birth mothers reported they have not adjusted well at all, while 21 (9.4%) reported feeling “neutral” about their adjustment. Forty (17.9%) first/birth mothers responded “I don’t know” to this question. (See Figure 29).

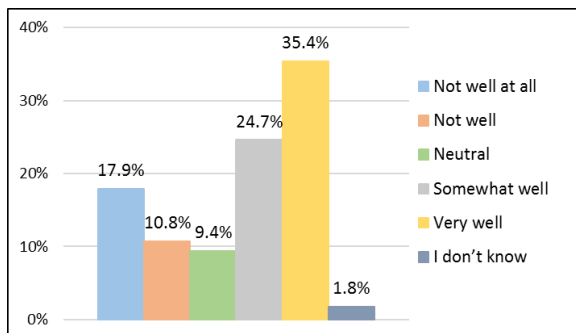


Figure 29 Adjustment to Decision to Relinquish (n=223)

Impact of decision on life. First/birth mothers were asked what impact the adoption has had on their life. Responses from first/birth mothers were very mixed. Fifty-nine (26.5%) first/birth mothers reported that the adoption has had an “overall negative impact,” while the same number of first/birth mothers (n=59, 26.5%) reported that the experience has had an “overall positive impact.” Slightly more than one-third (n=85, 38.1%) of first/birth mothers reported that the adoption has had a “mixed impact” on their life. Two respondents (<1%) reported the adoption had a “positive impact at first, but more negative impact now” while one (<1%) indicated that the adoption had “no impact” on their life. (See Figure 30).

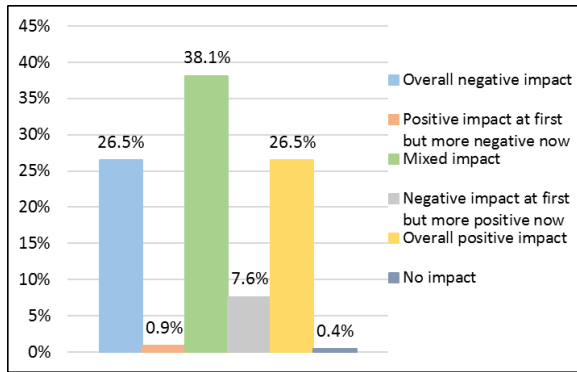


Figure 30 Impact of Adoption on Life (n=223)

Earliest that relinquishment papers should be signed. First/birth mothers were asked to identify the absolute soonest that an expectant parent should be permitted by law to sign relinquishment of parental rights documents for their child. Responses to this question varied; however, the highest proportion of respondents (n=66, 29.6%) indicated that first/birth parents should not be allowed to sign relinquishment papers until 8 or more days after the birth of the child. A small proportion of respondents (n=28, 12.6%) advocated for within 24 hours of the child’s birth or sooner. (See Table 9).

Table 9 Earliest Relinquishment Papers Should Be Signed (n=223)

	Frequency	Percent
While pregnant or within a few hours after the birth	12	5.4
24 hours (1 day) after the birth	16	7.2
48 hours (2 days) after the birth	26	11.7
72 hours (3 days) after the birth	47	21.1
4-5 days after the birth	18	8.1
6-7 days after the birth	21	9.4
8 or more days after the birth	66	29.6
I don’t know	17	7.6

Post-Placement Services and Support

“Finding a first/birth parent support group in the past 4 years has been paramount to being able to speak about my feelings and realize I am not alone. For years, this was not possible.” –first/birth mother

Available informal and formal supports. First/birth mothers were asked to identify the various forms of services and supports with which they have had access to since relinquishing their parental rights to their child for adoption. A majority (n=160, 71.7%) of first/birth mothers reported having access to postnatal care services after their child’s delivery. Many (n=136, 61%) first/birth mothers also reported having access to family and friends to support them post-relinquishment. Generally, first/birth parents reported having less access to informal supports, such as informal counseling services (n=147, 65.9%) or informal contact with other first/birth parents in their community (n=124, 55.6%). First/birth mothers also report difficulty accessing other informal supports such as online support groups for members of the adoption triad (n=145, 65.0%) or those targeted specifically to first/birth parents (n=139, 62.3%). (See Figure 31.)

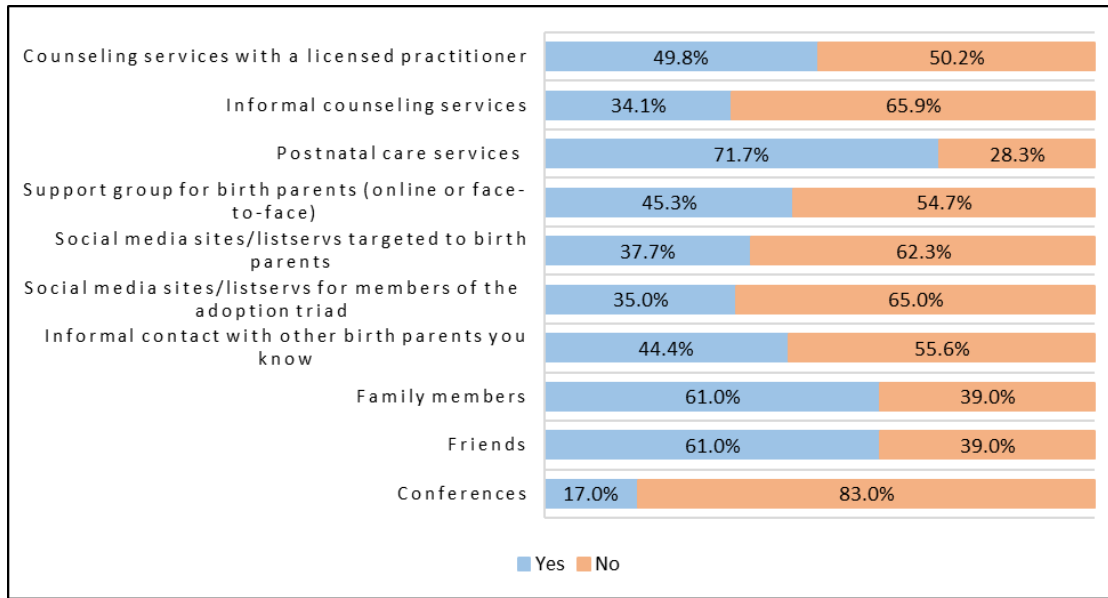
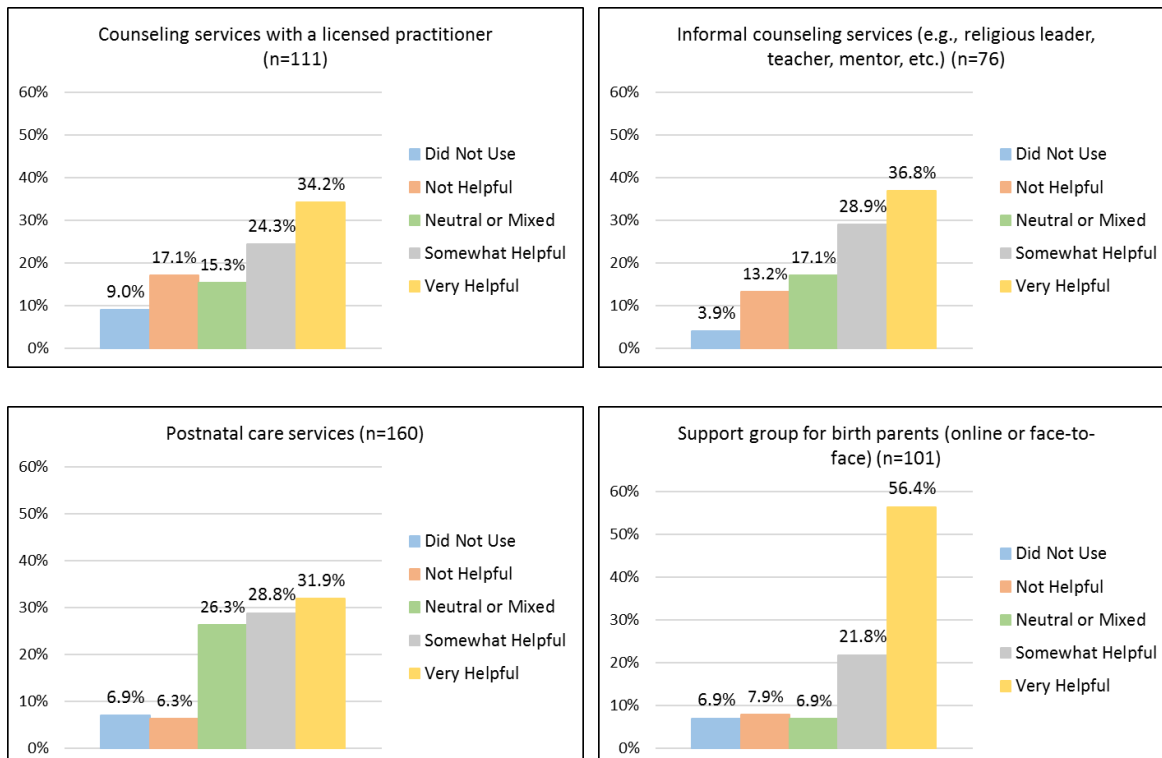


Figure 31 Access to Post-Relinquishment Services and Support (n=223)

Helpfulness of informal and formal supports. For each of the services and supports to which they accessed, first/birth parents were asked to indicate how helpful each was to them post-relinquishment. Overall, a majority of first/birth mothers reported that each of the services were “very helpful” or at least “somewhat helpful.” Support groups, on-line or face-to-face, appeared to be the most beneficial to first/birth parents. More than three-fourths (n=174, 78.2%) first/birth parents reported that support groups were either “very helpful” or “somewhat helpful.” While all of the services and supports that were listed were rated fairly positively, the support provided by family appeared to be the least helpful for some respondents. Forty-seven (21.3%) first/birth mothers reported that family members were “not helpful.”



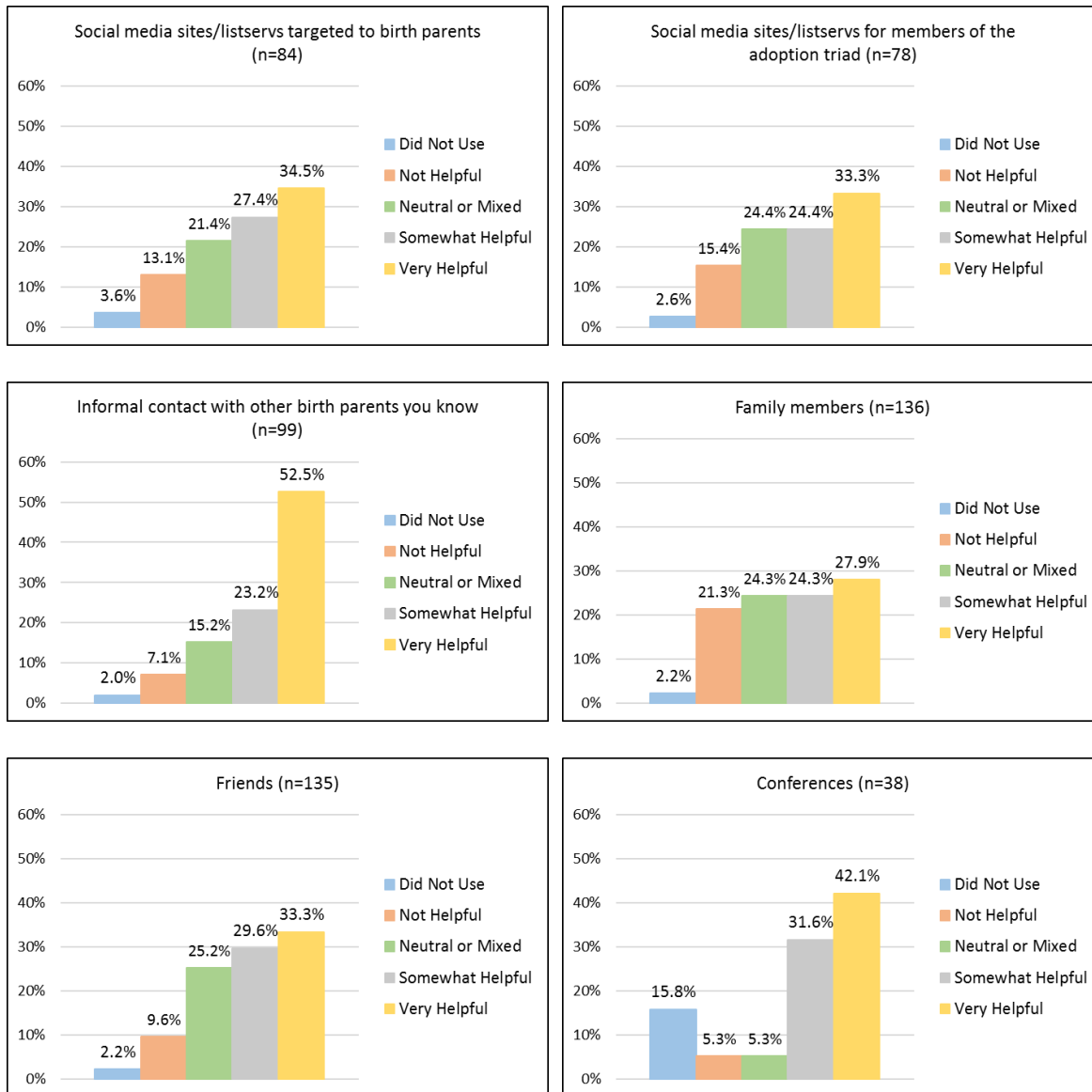


Figure 32 Helpfulness of Various Types of Post-Relinquishment Support and Services

Satisfaction with post-relinquishment support and services. Using a five-point Likert scale, first/birth parents were asked to indicate their overall satisfaction with the level of post-placement support available to them to address issues surrounding the relinquishment of their child. Ninety-six first/birth mothers (43%) reported that they were “not at all satisfied” with the level of support available to them after the placement of their child. Responses for the remaining 127 respondents were somewhat mixed. Slightly more than one-fourth (n=64, 28.7%) of first/birth mothers reported that they were “considerably satisfied” or “completely satisfied,” while the remaining 63 (28.2%) first/birth mothers indicated they were “a little satisfied” or “moderately satisfied” with the services and supports available to them after their child’s placement. (See Figure 33.)

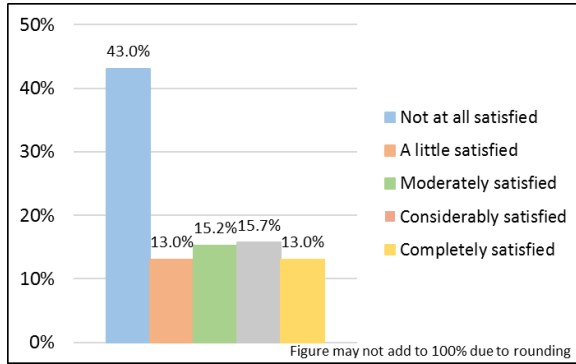


Figure 33 Overall Satisfaction with Post-Placement Services (n=223)

Post-Placement Contact

“After years of no contact, my birth daughter found me and we have been in contact. I'm disappointed in the lack of research, support & knowledge of the birth mothers, as well as knowledge on how to build a relationship once you meet for the first time.” –first/birth mother

Current contact arrangements. More than two-thirds (n=155, 69.5%) of first/birth mothers reported they have continuing contact with their children. Thirty (13.5%) indicated they have never had contact with their child. (See Figure 34).

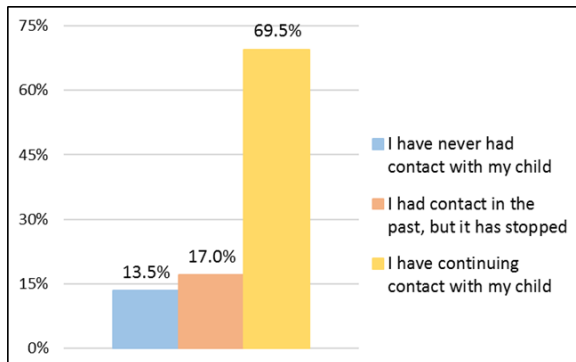


Figure 34 Current Contact Arrangements with Child (n=223)

First/birth mothers without current contact. Of the 68 first/birth mothers who do not have current contact with their child, 67 answered a series of questions about their wishes for future contact with their child. Fifty-six (83.6%) indicated they, or someone else, had made attempts to locate information about their child, while 11 (16.4%) reported they had not. An overwhelming majority (n=65, 97%) indicated they would like to have a reunion with their child. Of the 56 first/birth mothers who had sought out information, 49 (87.5%) reported they currently had identifying information about their child. Half (n=28, 50.0%) indicated they think “a lot” about contacting their child. None of the first/birth mothers selected “never” as a response to how frequently they think about contacting their child. (See Figure 35.)

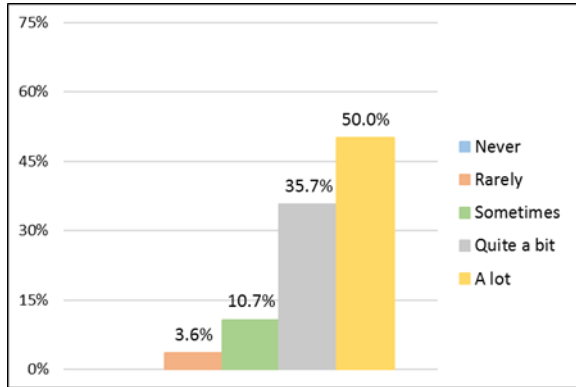


Figure 35 How Often Think of Making Contact with Child (n=56)

Frequency of contact. Of first/birth mothers who have contact with their children, 153 provided information about the frequency of their contact. Just over one-third (n=52, 34.0%) reported having between 3-11 contacts per year, while another one-quarter (n=37, 24.2%) indicated they had 12 or more contacts with their child per year. There was a notable number of first/birth mothers (n=30, 19.6%) who reported that contact occurred on a weekly or greater frequency. (See Figure 36.)

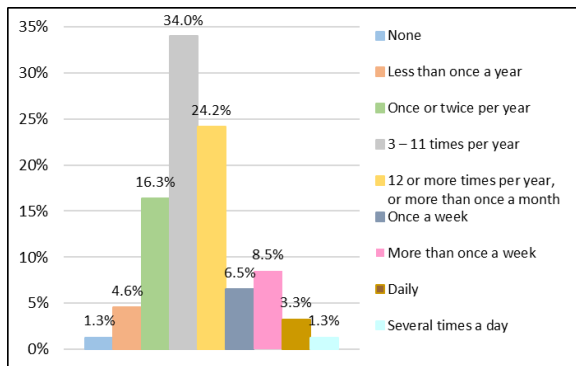


Figure 36 Frequency of Contact with Child (n=153)

How far away child lives. First/birth mothers also provided information about how far they live from their child. Of the 220 who answered the question, 94 (42.7%) reported that their child lives in the same state; whereas, 20 (9.1%) resided in the same community. For 56 (25.5%) of the first/birth mothers, their child lives across the country.

Table 10 How Far Away Child Lives (n=220)

Questions	Frequency	Percent
Lives in the same city/town	20	9.1
Lives in the same state but not the same city/town	94	42.7
Lives in the same region of the country but not the same state	42	19.1
Lives across the country	56	25.5
I don't know where he/she lives	8	3.6

Future contact. The majority of first/birth mothers (n=156, 70.9%) expressed a desire for additional contact with their child in the future. Two (1.8%) indicated a desired for decreased contact. Of those (n=14,

6.4%) who selected the “other” category, five (2.3%) explicitly expressed a desire for more contact as long as it was their child’s choice and did not create additional pain.

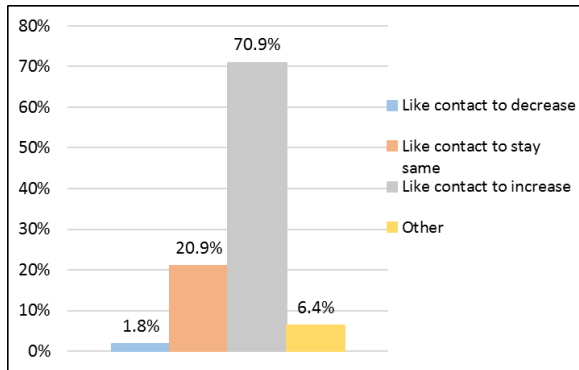


Figure 37 Amount of Contact Would Like in Future (n=220)

PART II: SURVEY OF ADOPTION PROFESSIONALS

METHODOLOGY

Recruitment of Participants

Respondents for the survey of adoption professionals were primarily recruited via email and the social media platform, Twitter. Over 950 emails were sent to individual adoption agencies, agency workers, and counselors in private practice known to provide counseling services to expectant and first/birth parents to request their participation in the survey. Two reminder emails were sent to potential participants over the course of the study to help increase the number of survey respondents. In addition, information about the survey was posted on the DAI website and on Twitter. Snowball sampling was also used to recruit additional participants, as respondents were asked to forward information about the survey to other potential participants.

Survey data were collected between February 2016 and July 2016. As with the survey of first/birth parents, Qualtrics was used to facilitate responses to the survey. In total, 147 individuals initiated the survey. However, six surveys were dropped from the sample as two participants did not consent to participate in the study and four participants identified that they did not work in the field of adoption. This resulted in a final analytic sample of 141 participants ($n=141$). It should also be noted that due to the varied methods that were used to recruit participants, a final response rate could not be calculated.

Demographic Characteristics of Survey Respondents

The vast majority of the sample was female ($n=131$). Ages of adoption professionals ranged from 23 to 73 ($M=43$, $SD=14.22$). In general, adoption professionals were highly educated, with the majority ($n=104$, 73.8%) reporting having a master's degree ($n=78$, 55.3%) or higher ($n=26$, 18.4%). Only one (<1%) respondent reported having less than a bachelor's degree. Of the 140 adoption professionals who reported having at least a bachelor's degree, social work was the most represented field of study ($n=45$, 31.9%), followed by psychology ($n=38$, 27.0%), Sociology ($n=8$, 5.7%), and Education ($n=7$, 5.0%). A total of 38 different states were represented, with the highest number of respondents reporting being from states in the Midwest ($n=46$; 32.6%) and South ($n=41$, 29.1%).⁸ Slightly less than one-third of adoption professionals in the study reported having personal experience with adoption as an adoptee, adoptive parent, or a first/birth parent ($n=42$, 29.8%). (See

⁸ Nine ($n=9$) respondents were missing data regarding the state in which they practice.

Table 11).

Table 11 Demographic Characteristics of Sample (n=141)

Variable	Mean	SD
Age at time of survey (Years)	43	14.22
	Frequency	Percent
Gender		
Male	10	7.1
Female	131	92.9
Education		
Some College	1	>1
Bachelor's degree	36	25.5
Master's degree	78	55.3
More than a Master's	26	18.4
Primary field of undergraduate degree		
Social Work	45	31.9
Psychology	38	27.0
Sociology	8	5.7
Education	7	5.0
Other	42	30.0
Region of practice⁹		
Midwest	46	32.6
Northeast	18	12.8
South	41	29.1
West	27	19.1
Years of experience		
Less than 5 years	41	29.1
5-10 years	47	33.3
11-20 years	24	17.0
More than 20 years	29	20.6
Identified as adoptee, adoptive parent, or birth parent		
Yes	42	29.8
No	99	70.2

Measure

As with the survey of first/birth parents, a new instrument was developed to survey professionals in the field of adoption who provide counseling and/or direct-services to expectant parents. The survey included 64 questions. In addition to demographic information, questions on the survey asked adoption professionals about their credentials; the number of years they have worked in the adoption profession; the number of expectant and first/birth parents they have counseled; the types of training and preparation they received (beyond their educational pursuits) to prepare for their role; their perceptions regarding their overall comfort with counseling expectant parents; the types of evidenced-based treatment modalities used with first/birth parents; and the types and content of written materials provided by counselors to first/birth parents. In addition to these questions, a section of the survey included questions designed to provide an understanding of the specific types of topics covered by adoption professionals during their work with expectant parents as well as the frequency with which these topics are discussed. See Appendix II for a list of questions included in the survey.

⁹ Regions were determined using the United States Census regions.

Data Analysis

Data for this study were analyzed using Statistical Package for Social Sciences (SPSS) version 24. Univariate statistics were used to examine questions on the survey. An analysis of missing data revealed no significant patterns, therefore, data were assumed to be missing at random. Missing data were not imputed or replaced.¹⁰

FINDINGS

Almost all adoption professionals reported being directly employed by a private adoption agency (n=117, 83.0%). Adoption professionals were asked the number of years in which they have worked with expectant parents in a professional capacity. Adoption professionals' experience ranged from less than one year to 43 years' experience (M=12, SD=11.98). An overwhelming majority of adoption professionals indicated having five or more years' experience (n=100, 70.3%). Adoption professionals were asked to rate their confidence in providing adoption services. Over 80 percent of adoption professionals rated themselves extremely confident (n=85, 60.3%) or moderately confident (n=46, 32.6%). Only two (1.4%) adoption professionals rated themselves slightly unconfident.

Adoption Professional Credentials and Training

"I have learned how serious the decision is to move a child from one family to another. It has a lasting (lifelong) effect. Honesty, trust, and focus on all members' good mental and emotional health are a must, as well as being clear about healthy boundaries within the triad and professional boundaries. Professionals need to be very clear about ethics. Birth parents are in a vulnerable position and could easily be taken advantage of. Our most successful adoptions occurs when there is great empathy for each other, particularly the adoptive parents for the birth parents."

—adoption professional

The method of training reported by adoption professionals was also diverse. Nearly all of the adoption professionals reported some form of on-the-job training (n=136, 96.1%) and most also reported accessing training materials such as books or pamphlets (n=112, 79.3%). Many adoption professionals received training from videos (n=63, 44.6%) and online workshops (n=61, 43.1%). Less common were reports of training from websites (n=12, 8.4%), agency manuals (n=7, 4.9%), or conferences (n=7, 4.9%). While only a few adoption professionals selected conferences as a source of training, a wide variety of conferences were reported by adoption professionals. The American Academy of Adoption Attorneys (n=7, 4.9%), the American Adoption Conference (n=6, 4.3%), and the North American Council on Adoptable Children

¹⁰ Due to missing data, as well as the use of a skip pattern during the administration of the survey for questions that were not applicable to certain respondents, it should be noted that the n's for some sections fluctuate throughout the report.

conference (n=5, 3.5%) were the most common conferences mentioned by adoption professionals. (See Table 12).

Table 12 Professional Credentials and Training (n=141)

Variable	Mean	SD
Years of experience at time of survey	12	11.98
	Frequency	Percent
Employed by a private adoption agency		
Yes	117	83.0
No	24	17.0
Years of experience		
Less than 5 years	41	29.1
5-10 years	47	33.3
11-20 years	24	17.0
More than 20 years	29	20.6
Confidence in Service Provision		
Extremely confident	85	60.3
Moderately confident	46	32.6
Neither confident or unconfident	2	1.4
Slightly confident	6	4.3
Slightly unconfident	2	1.4
Sources of training for adoption specific content¹¹		
On the job training	136	96.1
Agency manual	7	4.9
Workshops (online or in-person)	61	43.1
Conferences	7	4.9
Books and other written materials	112	79.3
Websites	12	8.4
Videos and other audio-visual materials	63	44.6
Prior education while enrolled in college or a master's degree	5	3.5
Other	5	3.5

Finally, more than one-third of the overall sample identified as being a licensed clinical practitioner (n=57, 40.4%). Of the 57 adoption professionals who identified as licensed clinical practitioners, slightly more than half identified as Licensed Clinical Social Workers (n=30, 52.6%), followed by Licensed Professional Counselors (n=6, 10.5%) and Licensed Marriage and Family Therapists (n=2, 3.5%). (See Table 13).

Table 13 Clinical Licensure of Adoption Professionals (n=57)

Variable	Frequency	Percent
Licensed clinical practitioner		
Yes	57	40.4
No	84	59.6
Type of clinical license		
Licensed Clinical Social Worker (LCSW)	30	52.6
Licensed Marriage and Family Therapist (LMFT)	2	3.5
Licensed Professional Counselor (LPC)	6	10.5
Other	19	33.3

¹¹ Respondents were given the option to identify several different sources of training for adoption-specific content; therefore, the cumulative percentage for this question exceeds 100%.

Information and Therapeutic Services Provided

“Many of the birth parents that come to my agency are due within a very short time. While I would love to provide more services to these mothers/fathers, I am limited to what I can do in a short time. I provide as much information as I can, but with a short time frame, I am not sure the birth parent absorbs it all. These parents tend to be the ones who do not come back for any follow-up or counseling services. I feel this leaves them at risk of depression or other bad outcomes.” –adoption professional

Adoption professionals were asked to specify if their clinical license permitted them to provide therapeutic counseling services. Fifty-five (96.5%) of the 57 adoption professionals who identified as licensed clinical practitioners, confirmed that their license permits them to provide therapeutic counseling services. Adoption professionals were also asked to identify the various therapeutic approaches they utilize during sessions. Adoption professionals selected an average of three therapeutic types, reflecting a preference towards eclecticism in their therapeutic practice. Crisis Intervention (n=35, 63.6%) was the most commonly selected approach, followed by Solution-Focused Brief Therapy (n=34, 61.8%), Person-Centered Therapy (n=33, 60.0%), Cognitive Behavior Therapy (n=31, 56.4%) and Family Systems Therapy (n=22, 36.4%). No other therapeutic approach was selected by more than ten adoption professionals. (See Table 14).

Table 14 Therapeutic Approaches Used in Counseling Sessions (n=55)

Variable	Frequency	Percent
License permits provision of counseling services		
Yes	55	96.5
No	1	1.8
I don't know/I can't remember	1	1.8
Therapeutic approach¹²		
Crisis Intervention	35	63.6
Solution-Focused Brief Therapy	34	61.8
Person Centered Therapy	33	60.0
Cognitive Behavior Therapy	31	56.4
Family Systems therapy	22	36.4
Narrative therapy	10	18.1
Reality therapy	9	16.4
Alderman therapy	1	1.8
Gestalt therapy	1	1.8
Humanist therapy	1	1.8
Strengths perspective	1	1.8
Interpersonal therapy	1	1.8
Other	8	14.5
I don't know/I can't remember	1	1.8

Provision of counseling services. The number of expectant parents with whom adoption professionals counseled in any given year varied greatly, from 5 or fewer (n=12, 18.6%) to more than 51

¹² Respondents were given the option to identify more than one therapeutic approach; therefore, the cumulative percentage for this question exceeds 100%.

(n=6, 10.9%). The highest proportion of adoption professionals indicated that they work with 6-10 (n=14, 25.5%) expectant parents a year. Approximately two-thirds (n=36, 65.5%) of the adoption professionals reported that their state had no minimum number of required face-to-face visits. Only 16 (29.1%) adoption professionals reported that their state had a minimum required number of visits and three (5.5%) indicated that they did not know. (See Table 15.)

Table 15 Provision of Counseling Services to Expectant Parents (n=55)

Variable	Frequency	Percent
Number counseled each year		
5 or less	12	18.6
6-10	14	25.5
11-20	10	18.2
21-30	9	16.4
31-40	1	1.8
41-50	2	3.6
51 or more	6	10.9
State mandated number of face-to-face counseling sessions		
Yes	16	29.1
No	36	65.4
I don't know/I can't remember	3	5.5

Types of services personally provided. Adoption professionals were asked to identify the different types of services that they personally provide expectant and first/birth parents. The most common activities that adoption professionals reported conducting included the provision of decision-making/options counseling services (n=132, 93.6%), followed by match meetings/introductions between expectant parents and prospective adoptive families (n=126, 89.4%), the provision of case management services (n=123, 87.2%), post-relinquishment referrals to first/birth parents (n=123, 87.2%), and hospital interventions with expectant parents (n=119, 84.4%). Less frequently, adoption professionals reported providing post-relinquishment support services, such as mediation/support between the first/birth families and adoptive families (n=108, 76.6%), therapeutic counseling (n=95, 67.4%) or support groups for first/birth parents (n=61, 43.3%). The least common service adoption professionals reported was support groups for expectant parents (n=34, 24.1%). (See Table 16.)

Table 16 Services Provided to Expectant and First/Birth Parents (n=141)

Variable	Frequency	Percent
Services personally provided to expectant and first/birth parents¹³		
Case management services for expectant parents	123	87.2
Decision-making/options counseling services for expectant parents	132	93.6
Pre-relinquishment support groups for expectant parents	34	24.1
Match meetings/introductions between expectant parents and prospective adoptive families	126	89.4
Hospital interventions with expectant and new parents	119	84.4
Post-relinquishment referrals to birth parents	123	87.2
Post-relinquishment therapeutic counseling to birth parent	95	67.4
Post-relinquishment support groups for birth parents	61	43.3

¹³ Respondents were given the option to identify more than one service; therefore, the cumulative percentage for this question exceeds 100%.

Post-relinquishment mediation/support between the birth families and adoptive families	108	76.6
Other	12	8.5

Specific materials and services regarding adoption. Adoption professionals were asked about specific types of materials and services that they offer to expectant parents. Eight adoption professionals (5.8%) reported that they do not provide any written materials to mothers. The remaining 133 (94.2%) professionals indicated they provide some form of written materials. Sixty-two (43.8%) adoption professionals reported that they provide visual materials such as videos. Most adoption professionals provided information about websites where expectant parents could access additional information (n=103, 73.0%). A majority of adoption professionals (n=114, 80.9%) indicated that they provide expectant mothers with access to first/birth parents who have relinquished their parental rights. However, only 74 (52.5%) provided linkages to other expectant parents weighing their options. (See Figure 38).

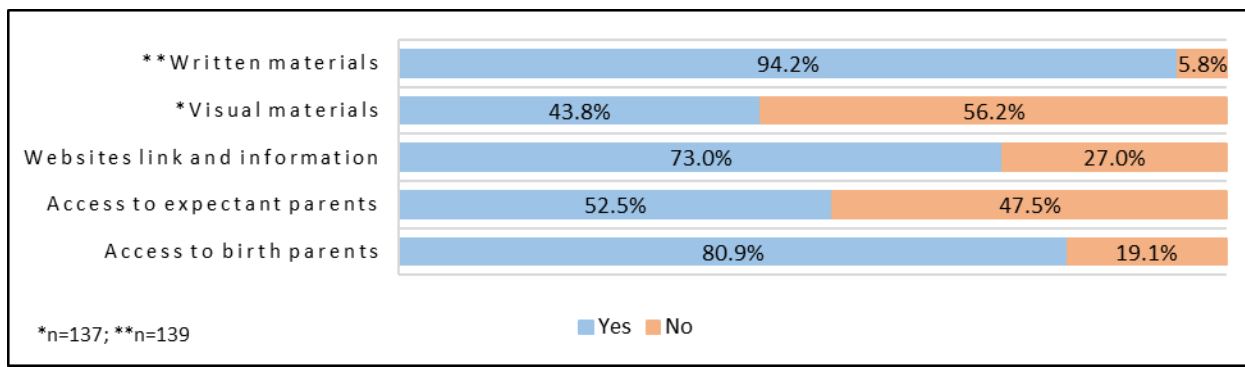


Figure 38 Types of Adoption-Related Materials Offered to Expectant Parents (n=141)

Specific materials and services regarding parenting. Additionally, adoption professionals were asked about specific types of materials and services that they offer expectant mothers regarding parenting. Written materials (n=103, 73.0%) were the most commonly provided sources of information about parenting and visual materials were the least common (n=39, 27.7%). Half (n=69, 48.6%) of adoption professionals reported providing expectant parents access to websites related to parenting while less than half (n=62, 43.9%) of adoption professionals indicated that they offer access to parents who considered adoption but decided to continue parenting their child. (See Figure 39.)

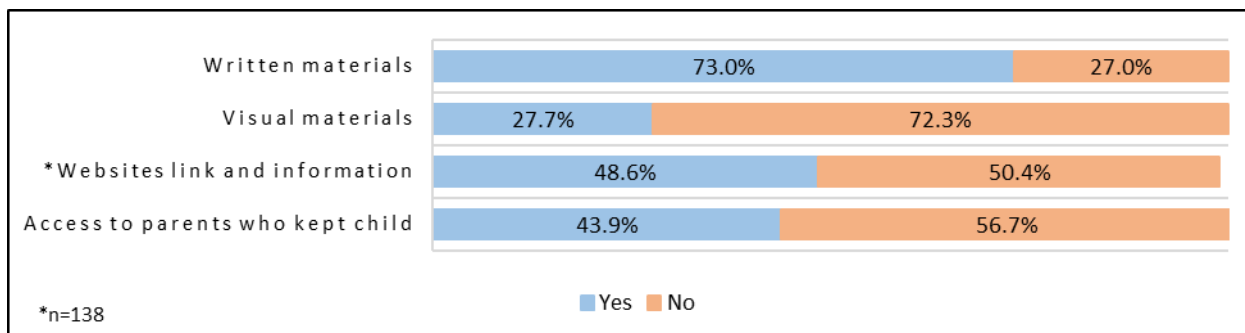


Figure 39 Types of Parenting-Related Materials Offered to Expectant Parents (n=141)

Frequency of content and information provided. Adoption professionals were asked to rank how frequently they discussed specific content and information with expectant parents. Answer options included “always”, “most of the time”, “half the time”, “sometimes”, and “never”. A majority (80% or more)

of adoption professionals answered “always” or “most of the time” for each of the questions posed that related to discussions of content related to parenting. (See Table 17).

Table 17 Frequency of Respondents’ Discussions of Topics Related to Parenting (n=140)

	Never	Sometimes	Half the time	Most of the time	Always
Their option to parent their child	1 (0.7%)	2 (1.4%)	1 (0.7%)	10 (7.1%)	126 (90.0%)
Positive implications of the decision to parent their child (i.e., pros of parenting)	2 (1.4%)	9 (6.4%)	7 (5.0%)	24 (17.1%)	98 (70.0%)
Negative implications of the decision to parent their child (i.e., cons of parenting)	5 (3.6%)	11 (7.9%)	8 (5.7%)	27 (19.3%)	89 (63.6%)
Specific formal community resources available to assist parents should they desire to parent their child (i.e., WIC, TANF, etc.)	3 (2.1%)	9 (6.4%)	8 (5.7%)	25 (17.9%)	95 (67.9%)
Informal supportive resources that may be available to assist parents should they desire to parent their child (i.e., extended family, friends, church, etc.)	1 (0.7%)	8 (5.7%)	6 (4.3%)	18 (12.9%)	107 (76.4%)

Discussion of option to terminate. With regard to discussions of a client’s option to terminate the pregnancy, adoption professionals were asked if they discussed the option to terminate the pregnancy with expectant parents. Thirty-nine (27.9%) adoption professionals said they always discuss the client’s option to termination of the pregnancy, while ten (7.1%) adoption professionals reported they discuss termination with clients most of the time. Forty-five (32.1%) adoption professionals reported that they never discuss termination and 44 (31.4%) indicated that they sometimes discuss this option. In a subsequent question, adoption professionals were also asked if they discuss specific formal community resources available to expectant parents should they opt to terminate their pregnancy. As with the previous question, adoption professionals were fairly split in their answers to this question. Adoption professionals most frequently indicated that they “never” discuss this information with expectant parents (n=55, 39.3%), while 46 (32.9%) adoption professionals indicated that they “always” discuss termination with expectant parents. (See Table 18.)

Table 18 Frequency of Respondents’ Discussions of Topics Related to Termination of the Pregnancy (n=140)

	Never	Sometimes	Half the time	Most of the time	Always
Their option to terminate the pregnancy	45 (32.1%)	44 (31.4%)	2 (1.4%)	10 (7.1%)	39 (27.9%)
Specific community and supportive resources available to parents should they desire to terminate their pregnancy	55 (39.3%)	28 (19.9%)	3 (2.1%)	8 (5.7%)	46 (32.9%)

Discussion about adoption. An overwhelming majority of respondents answered “always” or “most of the time” for each of the questions posed relating to adoption. (See Table 19).

Table 19 Frequency of Respondents' Discussions of Topics Related to Adoption (n=140)

	Never	Sometimes	Half the time	Most of the time	Always
Their option to place their child for adoption	0 (0%)	2 (1.4%)	0 (0%)	16 (11.4%)	122 (87.1%)
Positive implications of the decision to place their child for adoption (i.e., pros of relinquishing)	1 (0.7%)	5 (3.6%)	2 (1.4%)	16 (11.4%)	116 (82.9%)
Negative implications of the decision to place their child for adoption (i.e., cons of relinquishing)	2 (1.4%)	10 (7.1%)	4 (2.9%)	18 (12.9%)	106 (75.7%)
Specific community and supportive resources available to assist parents should they desire to place their child for adoption	1 (0.7%)	1 (0.7%)	4 (2.9%)	23 (16.4%)	111 (79.3%)

Discussion of information about pregnancy. Adoption professionals were asked the frequency with which they discuss information relating to expectant parents' pregnancies. Specifically, adoption professionals were asked how often they discuss the importance of prenatal health with parents. An overwhelming majority (n=131, 93.6%) of adoption professionals answered "always" or "most of the time" to this question. Adoption professionals were also asked how often they discuss ways that expectant mothers might promote maternal-child attachment during their pregnancies. Responses to this question varied. Forty-seven (33.6%) reported that they "always" discuss this information with expectant mothers. In contrast, 63 (44.8%) reported that they "never" or "sometimes" discuss this topic with expectant parents. (See Table 20.)

Table 20 Frequency of Respondents' Discussions of Other Topics Related to the Pregnancy (n=140)

	Never	Sometimes	Half the time	Most of the time	Always
Prenatal health	2 (1.4%)	5 (3.6%)	2 (1.4%)	21 (15.0%)	110 (78.6%)
How to promote maternal-child attachment during the pregnancy	22 (15.7%)	41 (29.1%)	7 (5.0%)	23 (16.4%)	47 (33.6%)

Discussion of legal aspects of relinquishment. Adoption professionals were asked a series of questions concerning whether they discuss various legal aspects that expectant parents might consider when considering relinquishing their parental rights to their child for adoption. As with other topics related to adoption, there was minimal variability in the responses to these questions. An overwhelming majority of adoption professionals answered "always" or "most of the time" for each of the questions posed in this section. Collective responses to these questions answering "always" or "most of the time" ranged from 114-139 adoption professionals (81.5% and 99.3%, respectively). (See Table 21).

Table 21 Frequency of Respondents' Discussions of Other Topics Related to the Legal Aspects of an Expectant Parent's Decision to Relinquish their Parental Rights (n=140)

	Never	Sometimes	Half the time	Most of the time	Always
Options for independent legal counsel to protect their best interests during the relinquishment process	8 (5.7%)	15 (10.6%)	3 (2.1%)	18 (12.9%)	96 (68.6%)

The complete continuum of openness in adoption and the implications of a decision to pursue this type of adoption arrangement (i.e., all available options for contact, including letters, pictures, phone calls, visits, etc.)	1 (0.7%)	0 (0%)	0 (0%)	5 (3.6%)	134 (95.7%)
The legal implications of open adoption agreements (i.e., agreements not enforceable in some states)	1 (0.7%)	2 (1.4%)	0 (0%)	9 (6.4%)	128 (91.4%)
Their right to reconsider their decision at any point prior to the legal finalization of the relinquishment	1 (0.7%)	0 (0%)	0 (0%)	5 (3.6%)	134 (95.7%)
Monetary rights, expectations, and responsibilities for their child (e.g., child support)	3 (2.1%)	13 (9.2%)	7 (5.0%)	15 (10.7%)	102 (72.9%)
Monetary expectations and responsibilities of the agency and/or prospective adoptive family	4 (2.9%)	9 (6.4%)	4 (2.9%)	19 (13.6%)	104 (74.3%)
Their rights to their child prior to the legal finalization of the relinquishment (e.g., seeing their baby, naming their baby, etc.)	1 (0.7%)	0 (0%)	0 (0%)	7 (5.0%)	131 (93.6%)
Their right to take the child home and parent the child while making a final decision regarding relinquishment or parenting	7 (5.0%)	14 (10.0%)	3 (2.1%)	14 (10.0%)	102 (72.9%)
Their rights to their child after the legal finalization of the relinquishment	5 (3.6%)	0 (0%)	0 (0%)	8 (5.7%)	127 (90.7%)
Discussion that the legal relinquishment time frame (e.g., after 48 hours or 72 hours) is the minimum amount of time in which a relinquishment can be signed	2 (1.4%)	1 (0.7%)	0 (0%)	3 (2.1%)	134 (95.7%)
Information about the circumstances under which a legal relinquishment can be revoked	7 (5.0%)	15 (10.7%)	0 (0%)	6 (4.3%)	112 (80.0%)
Information about the amount of time that a legal relinquishment can be revoked	9 (6.4%)	9 (6.4%)	0 (0%)	5 (3.6%)	117 (83.5%)
The other birth parent's parental rights to his/her child prior to the legal finalization of the relinquishment	2 (1.4%)	1 (0.7%)	0 (0%)	6 (4.3%)	131 (93.6%)
The other birth parent's parental rights to his/her child after the legal finalization of the relinquishment	4 (2.9%)	1 (0.7%)	0 (0%)	7 (5.0%)	127 (90.7%)

Minimum Waiting Period for Relinquishment

“I work with women all over the country. Seeing the huge differences in relinquishment time frames, revocation time frames and living expenses permitted from state to state can be frustrating. Some states make choosing adoption very difficult, while others make it almost too “easy”—not enough time between the child's birth and relinquishment.”

—adoption professional

The final question of the survey asked adoption professionals to identify the earliest time in their opinion that a parent should be permitted to sign relinquishment papers. Nearly all adoption professionals indicated that the earliest time this should be allowed to occur is within the first few days post-delivery. The most common time frame identified was within 48 hours of birth (n=45, 33.6%), followed by 72 hours of birth (n=33, 24.6%) and 24 hours after the birth (n=31, 23.1%). A small minority of adoption professionals answered that parents should be allowed to sign no sooner than 8 or more days (n=5, 3.7%). Six adoption professionals (4.5%) reported that parents should be able to sign relinquishment papers prior to birth or within a few hours of birth. (See Table 22.)

Table 22 Minimum Period of Time Before Relinquishment Can be Signed (n=134)

	Frequency	Percent
Within 24 hours of birth	31	23.1
Within 48 hours of birth	45	33.6
Within 72 hours of birth	33	24.6
4-5 days from birth	8	6.0
6-7 days from birth	6	4.5
8 or more days from birth	5	3.7
Before birth or within hours of birth	6	4.5

CONCLUSIONS AND RECOMMENDATIONS

First/Birth Mothers

Of the 223 first/birth mothers in the study, more than two-thirds reported that they seriously considered other options besides adoption, most commonly to parent their child. However, the majority of first/birth mothers who participated in this study also reported limited to no access to information about parenting. Furthermore, an overwhelming majority indicated they would have liked more knowledge about resources that could help them potentially parent their child. Supportive services is a broad term that is typically inclusive of emotional and social support but also more tangible resources, such as financial and housing assistance. For many of the first/birth mothers in this study, the lack of emotional and social support they felt they needed to successfully parent was one of the deciding factors in their decision to relinquish their parental rights to their child for adoption. Similarly, financial and housing concerns provided additional pressure, with approximately four of every five first/birth mothers in this study citing financial concerns as one of the reasons they chose to place their child. The findings of this study suggest that pressure is experienced from a variety of sources, with the most common sources being immediate family.

As first/birth mothers reported about the available people in their personal life who could provide support, a common phenomenon that emerged was that of isolation. Approximately half of the first/birth mothers lacked family or friends with whom they could share their concerns and feelings. Isolation, in this instance, does not mean that their families and friends were physically absent from the lives of the first/birth parents in this study. Rather, the responses of first/birth mothers suggest that they felt their families were unavailable for emotional and practical support to help them make a decision regarding their pregnancy that allowed for thoughtful consideration of other alternatives, specifically parenting their child. This experience of isolation during the decision-making process was likely compounded by the feeling many first/birth mothers had of professionals (i.e., attorneys, agency professionals/caseworkers, and/or counselors) working their case who failed to advocate with family members to support their interests.

“My domineering mother ran the show and my adoption agent did not speak with me unless my mother was present. I had my daughter at 20 and no one throughout the process asked me about my desires or offered information when I requested it. This was pre-internet days where it was difficult to find things as a frightened mother. I was never offered counseling. For years I thought I was the crazy one until I found a community of birth mothers. Turns out its not normal, contrary to my mother and agent, to go on with life as if nothing ever happened.”

—first/birth mother

Attorneys were the professionals least likely to be perceived as advocates. This finding is somewhat expected given that only about one in five of the first/birth mothers had access to their own legal representation. Typically, this meant the attorney “representing” the mother was employed by the prospective adoptive parents or the adoption agency. About half of the first/birth mothers who shared

their experiences expressed that they did not have sufficient time, or opportunity, to speak privately with the attorney as a family member was often in the meeting with them.

Furthermore, the responses of first/birth mothers who reported on information they received from an attorney, suggest that there was little consistency in the information they were provided with in regards to the content or scope of the topics discussed. When first/birth mothers were asked about specific types of options, services, and legal rights that would have been beneficial to understand during the decision-making process, anywhere from one-third to three-quarters of the respondents indicated that they did not receive pertinent information from an attorney. A common theme in the responses of first/birth mothers was a desire for increased information regarding the various legal aspects of adoption.

For many of the first/birth mothers, the experiences they had with attorneys were mirrored with other professionals with whom they worked. While each type of professional (i.e., attorneys, agency professional/ caseworkers, and counselors) possessed different strengths, independent counselors were the group most likely to be viewed by first/birth mothers as advocates. Additionally, the findings also show that compared to their counterparts, independent counselors were more likely to provide first/birth mothers with information about the various options available to them, as well as information about specific resources in the community related to parenting. According to the findings, agency professionals/caseworkers were the group most likely to provide information about services and legal aspects of adoption, while attorneys were more likely to focus on specific topics within the more narrow scope of their expertise. Regardless, first/birth mothers experienced a tremendous amount of inconsistency with regard to the information that was shared with them and how the information was discussed. The findings indicate that the experiences of many first/birth mothers, as they moved from pregnancy through decision-making to relinquishment and post-adoption, were traumatic and were punctuated by limited information and resources, external pressures, and lack of support. However, the findings also show that one-third of first/birth mothers who participated in the study experienced a more successful and less burdensome decision-making and relinquishment experience. For these women, the decision to relinquish their parental rights to their child for adoption was largely based on their own wishes.

Additionally, this subset of first/birth mothers reported satisfaction with their decision to relinquish.

“As difficult as choosing adoption was for my son, I still know it was the best choice for him. He is happy and healthy and very well cared for and loved. His parents and I are close friends, I contact them frequently and when both of our schedules allow we visit as often as possible.”

Adoption Professionals

The adoption professionals (N=141) who participated in the survey were highly educated, with most having at least a Master’s degree, and tended to have a demonstrated commitment to the field, with slightly less than three-fourths of adoption professionals having worked for five or more years. Concurrently, most respondents report feeling a high level of confidence in the provision of services. Additionally, adoption professionals in this study reported receiving training from a variety of different sources, with the vast majority receiving on-the-job training. As there are no uniform standards that agencies are mandated to follow, this training varies from agency to agency. Additionally, few professionals reported attending adoption-focused conferences, which would offer the opportunity to share new practices with others and to gain new perspectives from other members of the adoption triad who may be in attendance.

“The social safety net is so shredded it can be hard to ensure an expectant parent has enough stability from which to make this profound, life-altering choice. Better public policy could support women having a stable place (e.g. food and housing) so they don't feel they have to make pressured, rushed decisions. The income disparity between birth and adoptive parents is widening to the point of being shocking in some cases and this disparity is affecting the relationships between the two families as they move forward with one another post-placement.”

—adoption professional

providing information and materials regarding parenting, all participants reported doing this less frequently, regardless of the type of materials. Written materials were still the most commonly provided materials at about three-quarters; however, no other types of materials and/or contacts were available to more than half of respondents. In fact, information from other expectant parents considering adoption and parents who considered adoption but chose to parent were among the least available sources of information.

When asked about the frequency with which they discussed specific topics, nearly every participant reported discussing the topics either most of the time or all of the time. Conversations relating to termination of the pregnancy were the only exception to this trend. Slightly more than a quarter of the participants reported discussing the option to terminate a pregnancy with every client, and the proportion increased to about one-third when factoring in those who said they do this most of the time. Additionally, when discussing community resources where termination could be sought, about one-third reported always providing this information but almost 40 percent said they never do. The lack of dialogue about abortion/termination could possibly be attributed to the faith-based nature of many adoption agencies. However, it may be a reflection of the fact that many first/birth parents in the survey had already weighed termination prior to seeking services from adoption professionals and determined it was not a suitable option moving forward.

Differences among agencies may also be reflected in the responses of participants regarding the number of expectant mothers with whom they worked during the year and in the number of sessions they had with each mother. While a clear plurality of participants had a significant number of face-to-face visits with the mothers (6-9), about as many had five or fewer as those who had 10 visits or more. This significant variation in the number of visits may be linked to training or rapport with the mothers. Of course, this difference may also be reflected in the time at which the expectant mother comes to the agency (late in the pregnancy versus early in the pregnancy). Professionals employed by a private agency were significantly more likely to have increased face-to-face sessions with expectant mothers.

Little uniformity was found in the types of information and materials that were provided to expectant mothers. While nearly every participant reported providing written materials regarding adoption, less than half provided access to videos or other visual materials and only slightly more provided website information. When asked about

Recommendations

- **Develop and Adopt Best-Practice Guidelines for The Provision of Options Counseling** - Adoption professionals reported providing information at a greater frequency than first/birth mothers reported receiving it. Due to the external forces that pressure many expectant mothers to consider adoption and the physical and emotional toll of pregnancy and delivery, expectant mothers may benefit from multiple conversations, when possible, to ensure that they are able to adequately weigh the information and assess the various services available. To counter the discrepancy between the agency professionals' and first/birth mothers' reported experiences surrounding different types of information, national guidelines should be developed and adopted that clearly delineate the specific information that should be discussed with expectant parents.
- **Develop and Adopt Evidence-based Written Materials about Options** - First/birth mothers reported varying degrees of access to written information about their options. Therefore, the provision of evidence-based written materials about all options should be established as a best practice. This material should be regulated, and perhaps developed at the national level to foster uniformity and reduce bias in the information provided to expectant parents. Additionally, the materials should be made available online for wide distribution. Adoption professionals could be mandated to provide this material to all expectant parents as a starting point for more in-depth exploration of supports available in their community. In addition, having well-developed written materials that can be shared with family and friends may result in natural support systems who are better informed and, thus, more capable of assisting expectant parents as they consider their options.

"I approach my work with expectant parents with a family preservation stance, the same stance that occurs in the child welfare system. The understanding I bring to my clients is that the best place for the baby is with their parents or in the family of origin. That adoption is not just another option to a crisis pregnancy, but should be the option of last resort."

—adoption professional
- **Establish Best-Practice Guidelines for Persons Providing Options Counseling** - First/birth mothers overwhelmingly reported the helpfulness of access to independent counselors. Additionally, a greater number of first/birth mothers reported receiving more information about the full range of their options from counselors than attorneys or agency professionals. While some states mandate that expectant parents either be provided or made aware of counseling services, few provide guidelines for who should offer this service. This finding suggests that independent counselors may not only be the most likely to present options counseling to expectant parents, but also that they may be best suited to provide information on options in an impartial and non-biased manner. Therefore, best practices guidelines about the use of independent counselors for expectant parents in a crisis pregnancy should be established.
- **Increase Expectant Parents' Access to Support Groups and Other Parents** - Isolation was a common experience for many of the first/birth mothers. However, only a small percentage were referred to support groups for expectant parents and there was no universal access to support groups post-adoption. Yet, at both stages, first/birth mothers who participated in these groups

tended to find them a valuable source of support. Therefore, adoption professionals, particularly agency professionals/caseworkers who provide access to information and services, should prioritize the use of support groups involving first/birth parents who have placed a child, as well as those with other expectant parents who are considering adoption, during the decision-making and post-adoption phases of the process. Additionally, parents who considered adoption for their child, but instead who decided to continue parenting, should also be made available to expectant parents.

- ***Inform Expectant/New Parents about Available Financial and Housing Resources*** – Financial and housing concerns were the first and third, respectively, most common pressures first/birth mothers reported in their decision-making process. Financial concerns were the number one reason identified by first/birth mothers for relinquishing their parental rights. Adoption professionals, particularly agency professionals/caseworkers, have a responsibility to ensure that expectant/new parents are aware of public and private assistance programs that can provide financial and housing support. Greater information about social services could help reduce the financial pressures that ultimately lead some parents to relinquish their parental rights to their child for adoption.
- ***Provide Expectant/New Parents with Access to Unbiased Legal Representation*** - First/birth mothers expressed a repeated desire for access to legal representation and information. While adoptive parents and adoption agencies typically have legal staff that represents their interests, it was not uncommon for first/birth mothers to report that they did not have access or support focused on ensuring that they fully understood applicable adoption statutes and their legal rights. It is imperative that expectant mothers have access to unbiased legal representation who can educate, support, and advocate for expectant parents as they deliberate their options. Furthermore, it is important for parents to have legal representation after the child is born, particularly if they are reconsidering the relinquishment of their parental rights or if their state has legally binding open adoption agreements.
- ***Establish and Adopt a Standard Waiting Period*** – A national standard for minimum wait periods before relinquishment papers can be signed should be established. While a high percentage of agency professionals supported a waiting period of three or fewer days after the child's birth before relinquishment papers could be signed, many first/birth mothers supported a longer waiting period, with one in three supporting a period of 8 or more days. Since the decision to relinquish is so profound, providing an empirically supported wait period that is uniformly endorsed may reduce the parent's distress, as well as increase a parent's certainty about his or her ultimate decision. Additional research is needed to determine the most appropriate length for a minimum wait period.
- ***Establish Best Practice Guidelines for Therapeutic Work with Expectant Parents*** – Adoption professionals utilize a wide array of therapeutic approaches in their work with expectant and first/birth mothers. Additional research is needed to ascertain the effectiveness of the approaches used in helping expectant parents more fully understand the implications of all of their options, explore the resources and services that are available to them, reduce the impact of external pressures on their decision-making process, and, ultimately, help them select the option that is best for them. It may be that certain interventions are more effective in empowering expectant mothers to make decisions throughout the process.
- ***Establish Best Practice Guidelines for Education and Therapeutic Work with Expectant Parents' Families*** – Many of the first/birth mothers in this study reported a lack of emotional and social support during their decision making process. In fact, lack of support was one of the leading factors for many first/birth mothers in their decision to relinquish their parental rights to their child for

adoption. Providing education and family counseling to expectant parents and their family members might provide a neutral forum for families to address miscommunications, needs, and emotional strains resulting from the pregnancy, which might allow family members to be a better support to the expectant parents' during the decision-making process. Additionally, education about community resources could allay families' fears that expectant parents would not be able to support their child.

Study Limitations

To our knowledge, this study is unprecedented. This study is the first to examine the type and nature of information provided to expectant parents who are considering making an adoption plan. Nevertheless, all studies have inherent limitations, and this study is not without exception. First, as in almost all social science research, the individuals who responded to these surveys represent a convenience sample. Therefore, the presence of selection bias cannot be entirely eliminated, as those who were uncomfortable with or unfamiliar with taking a survey online were less likely to participate. Additionally, given that first/birth parents were recruited through support and interest groups on social media, it is possible that first/birth parents who participated in this study may feel more freedom and comfort in sharing their experience with adoption than the average first/birth mother population. Third, despite our best efforts to recruit diverse samples for the two surveys, the samples for the two studies were significantly skewed toward female and White. That said, the composition of first/birth mothers in this study is consistent with prior literature that has found White women relinquish infants for adoption at higher rates than women of color (Wiley & Baden, 2005). In surveying adoption professionals, the study is limited in many of the same ways already listed. Adoption professionals who responded to the survey may be more invested in positive outcomes with first/birth families. Furthermore, as identified in the findings, adoption agencies are committed to the adoption process and many of our participants were employed by adoption agencies. This sample may be more inclined to provide services and information regarding adoption than they are to provide information regarding parenting. Finally, asking adoption professionals to rate themselves, their skills, and their provision of services is implicitly biased since they have a vested reason in giving themselves positive ratings. They were not asked to rate other professionals or their opinions about the private adoption field in general. Therefore, the findings of this study cannot be generalized to the broader first/birth parent and adoption professional populations.

Despite the above and other limitations, this study is not without important strengths. One primary strength of the study was our ability to reach out to a marginalized and rarely accessed population. First/birth parent respondents had much to say about the experience of relinquishing their parental rights to their child for adoption and the impact their decision has had on other facets of their lives. An additional strength relates to the diversity of experiences reported by first/birth mothers. The current first/birth parent sample reported a wide spectrum of experiences with options counseling and with the decision-making and relinquishment process. By surveying a cross-section of adoption professionals, including those who worked for private adoption agencies and those who did not, we provided a sample that contains myriad viewpoints across the spectrum of private adoption services. Additionally, the survey reached nearly every state and had professionals with a range from experience from months to decades. While the findings of this study cannot be generalized, it is notable that the experiences reported by respondents for both surveys were varied and represent the full spectrum of views about adoption.

The current study represents a significant step forward in the research on the experiences of expectant and first/birth parents, specifically the context in which the various options are presented and discussed with

expectant parents facing a crisis pregnancy. Additionally, this study contributes new insights into when and how options are discussed with expectant and first/birth parents and provides an empirical foundation for developing and refining best practice standards in this area.

Conclusion

Many first/birth mothers in the study indicated that relinquishing parental rights to their child for adoption was their best option at that time. However, for too many others, the lack of resources and support, compounded by the external pressures that many felt to relinquish their parental rights to their child for adoption created an environment that was void of choice and viable options. As a result, many first/birth mothers reported that their decision to place their child has had a negative impact on their lives. Parenting-focused information and services provided to the first/birth mothers ensures they will have the ability to make a truly informed decision about their options. For options counseling to be a just and effective practice, equal attention should be devoted to all options. Expectant mothers deserve access to trained, informed, and unbiased adoption professionals (i.e., attorneys, agency professionals/caseworkers, and independent counselors) who will advocate for their rights and help ensure they have all of the necessary information and resources needed to make an informed decision. Safeguarding the rights of expectant parents will help ensure that adoption becomes a valid and coercion-free option that enables a parent to make the best decision for their child.

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Appendix I: First/Birth Mother Survey

What was your role in the adoption?

- ☐ Birth mother
- ☐ Birth father
- ☐ Neither birth mother nor birth father

Are you at least 18 Years or older?

- ☐ Yes
- ☐ No

Have you ever relinquished a child for adoption in the United States while working with a private agency or private attorney (i.e., not through Child Protective Services)?

- ☐ Yes
- ☐ No

What year did you relinquish your child for adoption? (If unsure, please estimate the year to the best of your memory; If more than one relinquishment, please answer the question based on your last relinquishment)?

- ☐ 1989 or earlier
- ☐ 1990 or later

Please specify the year you relinquished your child for adoption.

- ☐ Please Select the Year (Drop Down List Provided)

Current Bio-demographic Information

Thank you for agreeing to complete this survey. Please read each question carefully and select the option that is most appropriate, or fill in the space provided. First, we would like to ask you some questions about your current situation.

What month were you born?

- ☐ January
- ☐ February
- ☐ March
- ☐ April
- ☐ May
- ☐ June
- ☐ July
- ☐ August
- ☐ September
- ☐ October
- ☐ November
- ☐ December

What year were you born?

- ☐ Please Select the Year (Drop List of Years Provided)

What is your race/ethnicity? (check all that apply)

- ☐ African American/Black
- ☐ American Indian/Native American
- ☐ Asian/Pacific Islander
- ☐ Caucasian/White (non-Hispanic)
- ☐ Hispanic/Latina
- ☐ Other [please specify] _____

What is the highest level of education you have completed?

- ☐ Less than high-school
- ☐ High-school graduate or GED
- ☐ Some vocational/technical training (after high school)
- ☐ Completed vocational/technical training (after high school)
- ☐ Some college/A.A. degree
- ☐ Completed bachelor's degree
- ☐ Some graduate training beyond a bachelor's degree
- ☐ Completed master's degree
- ☐ Some graduate training beyond a master's degree
- ☐ Completed doctoral degree or other professional degree (e.g., Ph.D., DDS, JD, MD, etc.)

What is your current relationship status?

- ☐ Single
- ☐ Living with partner
- ☐ Married
- ☐ Separated
- ☐ Divorced
- ☐ Widowed
- ☐ Other [please specify] _____

TOTAL number of individuals in your household (including yourself):

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12+

What is your current employment status?

- ☐ Stay at home parent
- ☐ Unemployed, but looking
- ☐ Unemployed, but not looking
- ☐ Employed part-time
- ☐ Employed full-time
- ☐ Retired
- ☐ Other [please specify] _____

What is your current occupation?

[please specify] _____

Which category best describes your total annual household income (from all sources)?

- ☐ Less than \$20,000
- ☐ \$20,000--\$29,999
- ☐ \$30,000--\$39,999
- ☐ \$40,000--\$49,999
- ☐ \$50,000--\$59,000
- ☐ \$60,000--\$69,999
- ☐ \$70,000--\$79,999
- ☐ \$80,000--\$89,999
- ☐ \$90,000--\$99,999
- ☐ \$100,000--\$109,999
- ☐ \$110,000--\$119,999
- ☐ \$120,000--\$129,999
- ☐ \$130,000--\$139,999
- ☐ \$140,000--\$149,999
- ☐ \$150,000 or more

Religious affiliation:

- ☐ Not applicable
- ☐ Christian
- ☐ Jewish
- ☐ Muslim
- ☐ Non-specific/Spiritual
- ☐ Agnostic
- ☐ Atheist
- ☐ Other [please specify] _____

How much do you rely on your religious/spiritual beliefs to guide your daily decisions and/or your values?

- ☐ Never
- ☐ Rarely
- ☐ Sometimes
- ☐ Very Often
- ☐ Always

How active are you in your religious/spiritual practice(s) at this time?

- ☐ Inactive
- ☐ Not very active
- ☐ Very active
- ☐ Extremely active

Your Children

This next set of questions concern your children - those you have parented as well as the child (or children) you placed for adoption.

Number of children for whom you have signed a relinquishment of parental rights:

- ☐ 1
- ☐ 2
- ☐ 3 or more

Child(ren) for whom you signed a relinquishment of parental rights since 1990:

	Gender	Race/ Ethnicity	Month of Birth	Year of Birth	Any special needs?	State in which relinquishment of parental rights occurred
Child						

Other children you have parented or are parenting: (Please do not include children relinquished for adoption).

- ☐ 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6+

Other children you are parenting or have parented (Please do not include children relinquished for adoption).

	Age	Relationship to child	Any special needs?	Living with you at this time?	If no, what is their current living situation?
Child					

The Pregnancy

Now we would like to ask you some questions about your pregnancy with the child that you placed for adoption. (Note: If you have placed more than one child for adoption, please answer the questions with your most recent placement experience in mind).

At what stage of the pregnancy did you first find out or suspect that you were pregnant?

- ☐ First trimester
- ☐ Second trimester
- ☐ Third trimester
- ☐ At the time of delivery
- ☐ I don't know/I can't remember

How did you feel about the pregnancy at the time you found out? (check all that apply)

- ☐ Very happy about it
- ☐ Disrupted, but happy nevertheless
- ☐ Neutral (neither happy nor unhappy)
- ☐ Disrupted and unhappy
- ☐ It was a major disaster in my life
- ☐ I don't know/I can't remember

Did you disclose the pregnancy to the child's birth father?

- ☐ Yes
- ☐ No

When did you disclose the pregnancy to the child's birth father?

- ☐ During the pregnancy
- ☐ After the baby was born
- ☐ I don't know/I can't remember

Was the child's birth father involved with you during your pregnancy (romantically or non-romantically)?

- ☐ Not at all involved
- ☐ A little involved
- ☐ Moderately involved
- ☐ Considerably involved
- ☐ Very involved
- ☐ I don't know/I can't remember

Was the prospective adoptive family involved with you during your pregnancy?

- ☐ Not at all involved
- ☐ A little involved
- ☐ Moderately involved
- ☐ Considerably involved
- ☐ Very involved
- ☐ Not applicable, I did not select an adoptive family during my pregnancy

- ☐ I don't know/I can't remember

What types of contact did you have with the prospective adoptive family during your pregnancy? (check all that apply)

- ☐ Letters
- ☐ Gifts
- ☐ Pictures
- ☐ Phone Calls
- ☐ E-mails
- ☐ Text messages
- ☐ Instant messages or chat
- ☐ Skype / video calls
- ☐ Personal face-to-face visit
- ☐ Facebook – sending and receiving messages
- ☐ Twitter – sending and responding to tweets
- ☐ Other social networking site
- ☐ Through an external third party (e.g., adoption agency, attorney, facilitator)
- ☐ Other [please specify] _____

Considering all the types of contact mentioned above, on average, how frequently did you have contact with the prospective adoptive family during your pregnancy? (choose the frequency that best describes your overall level of contact)

- ☐ None
- ☐ Once
- ☐ 2-4 times
- ☐ 5-8 times
- ☐ 9 or more times
- ☐ Once a month
- ☐ Once a week
- ☐ Daily
- ☐ Several times a day
- ☐ Other [please specify] _____

On a scale of 1 to 10, where 1 is extremely dissatisfied, 5 is neutral, and 10 is extremely satisfied, please rate your satisfaction with the frequency of contact you had with the prospective adoptive parents during your pregnancy.

_____ Satisfaction

Did you accept any financial assistance/gifts from an adoptive agency or prospective adoptive family at any time during the pregnancy?

- ☐ Yes
- ☐ No
- ☐ Not applicable
- ☐ I don't know/I can't remember

What types of financial assistance/gifts were provided? (check all that apply)

- ☐ Maternity clothes
- ☐ Assistance with groceries
- ☐ Utility expenses
- ☐ Cellphone/phone expenses
- ☐ Rental assistance
- ☐ Unreimbursed medical expenses
- ☐ Transportation expenses
- ☐ I don't know/I can't remember
- ☐ Other [please specify] _____

Information and Services You Received

This section includes questions about the information and services that you received from various individuals and entities when making a decision about placing your child for adoption and when arranging your child's placement. (Note: If you have placed more than one child for adoption, please answer the questions with your most recent placement experience in mind).

Who helped you arrange your child's placement?

- ☐ Licensed adoption agency
- ☐ Independent attorney not affiliated with an adoption agency
- ☐ Facilitator or intermediary who introduced me to the adoptive parents (if a private independent adoption)
- ☐ Other [please specify] _____

With which adoption agency did you work?

- ☐ Please select an agency (Drop down list provided)
- ☐ Other [please specify] _____
- ☐ I don't know/I can't remember

With which organization did you work to find the attorney or facilitator?

- ☐ Please select an organization (Drop down list provided)
- ☐ Other [please specify] _____
- ☐ I don't know/I can't remember

How did you locate the individuals/agency that helped you plan your child's placement?

- ☐ Had prior knowledge of the individual/agency
- ☐ Internet search
- ☐ Phone book
- ☐ Advertisement (e.g., newspaper or Craigslist)
- ☐ My child's birth father
- ☐ Friend or relative
- ☐ Community clinic social worker or nurse
- ☐ Hospital social worker or nurse
- ☐ Crisis pregnancy center employee
- ☐ Clergy or place of worship
- ☐ School counselor
- ☐ Other [please specify] _____
- ☐ I don't know/I can't remember

Please indicate if you had access to each of the sources of information below to help you make a decision for your child (e.g., parenting, relinquishment).

	Yes	No
Books on adoption	<input type="radio"/>	<input type="radio"/>
Pamphlets and other written materials on adoption	<input type="radio"/>	<input type="radio"/>
Videos on adoption	<input type="radio"/>	<input type="radio"/>
Adoption-related websites	<input type="radio"/>	<input type="radio"/>
Information from other expectant parents considering adoption	<input type="radio"/>	<input type="radio"/>
Information from birth parents who had placed a child for adoption	<input type="radio"/>	<input type="radio"/>
Books on parenting	<input type="radio"/>	<input type="radio"/>
Pamphlets and other written materials on parenting	<input type="radio"/>	<input type="radio"/>
Videos on parenting	<input type="radio"/>	<input type="radio"/>
Parenting-related websites	<input type="radio"/>	<input type="radio"/>
Information from other birth parents who considered adoption but chose to parent rather than place their child for adoption	<input type="radio"/>	<input type="radio"/>
Other web options/listservs [please specify]	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>

For those services for which you indicated access, please indicate how helpful each of the sources were in helping you make a decision (e.g., parenting, relinquishment) for your child.

	Did not use	Not helpful	Somewhat helpful	Very helpful
Books on adoption	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pamphlets and other written materials on adoption	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Videos on adoption	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adoption-related websites	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information from other expectant parents considering adoption	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information from birth parents who had placed a child for adoption	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Books on parenting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pamphlets and other written materials on parenting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Videos on parenting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parenting-related websites	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information from other birth parents who considered adoption but chose to parent rather than place their child for adoption	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other web options/listservs [please specify]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

For the different services listed below, please indicate if you had access to the service when making a decision (e.g., parenting, relinquishment) for your child.

	Yes	No
Legal representation/counsel – an attorney for the agency/adoptive parents (who you had access to)	<input type="radio"/>	<input type="radio"/>
Legal representation/counsel – an attorney just for you	<input type="radio"/>	<input type="radio"/>
Adoption agency professional/caseworker who worked for the agency	<input type="radio"/>	<input type="radio"/>
Professional counseling services with an independent licensed practitioner affiliated with an agency/attorney	<input type="radio"/>	<input type="radio"/>
Professional counseling services with an independent licensed practitioner not affiliated with an agency/attorney	<input type="radio"/>	<input type="radio"/>
Informal counseling services (e.g., religious leader, teacher, mentor)	<input type="radio"/>	<input type="radio"/>
Prenatal care services to monitor your health and the baby's health	<input type="radio"/>	<input type="radio"/>
Support group for expectant parents	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>

For the different services that you indicated were available, please indicate how helpful the service was when making a decision (e.g., parenting, relinquishment) for your child.

	Not helpful	Neutral/ mixed	Somewhat helpful	Very helpful
Legal representation/counsel – an attorney for the agency/adoptive parents (who you had access to)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Legal representation/counsel – an attorney just for you	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adoption agency professional/caseworker who worked for the agency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Professional counseling services with an independent licensed practitioner affiliated with an agency/attorney	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Professional counseling services with an independent licensed practitioner not affiliated with an agency/attorney	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Informal counseling services (e.g., religious leader, teacher, mentor)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prenatal care services to monitor your health and the baby's health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Support group for expectant parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Who referred you to the attorney?

- ☐ No one, I located the attorney on my own
- ☐ My child's birth father
- ☐ Friend or relative
- ☐ Licensed adoption agency professional
- ☐ Professional counselor
- ☐ Independent attorney representing the adoptive parent
- ☐ Facilitator or intermediary who introduced you to the adoptive parents (if a private independent adoption)
- ☐ Crisis pregnancy center employee
- ☐ Clergy or place of worship
- ☐ Maternity home employee
- ☐ Other [please specify] _____

Did the attorney talk with you about any of the topics listed below? Please count only discussions you had with a licensed attorney, not reading materials, videos, or discussions with other individuals.

	Yes	No
Your options, including both parenting and adoption	<input type="radio"/>	<input type="radio"/>
Resources available to assist you should you desire to parent your child	<input type="radio"/>	<input type="radio"/>
Resources available to assist you should you desire to place your child for adoption	<input type="radio"/>	<input type="radio"/>
Implications of the decision to parent your child	<input type="radio"/>	<input type="radio"/>
Implications of the decision to place your child for adoption	<input type="radio"/>	<input type="radio"/>
Options for independent legal counsel to protect your best interests during the relinquishment process	<input type="radio"/>	<input type="radio"/>
The complete continuum of openness in adoption and the implications of a decision to pursue this type of adoption arrangement (i.e., all available options for contact, including letters, pictures, phone calls, visits, etc.)	<input type="radio"/>	<input type="radio"/>

	Yes	No
Your right to reconsider your decision at any point prior to the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
Monetary rights, expectations, and responsibilities for your child (e.g., such as child support)	<input type="radio"/>	<input type="radio"/>
Monetary expectations and responsibilities of the agency and/or prospective adoptive family	<input type="radio"/>	<input type="radio"/>
Your parental rights to your child prior to the legal finalization of the relinquishment (e.g., seeing your baby, naming your child, etc.)	<input type="radio"/>	<input type="radio"/>
Your parental rights to your child after the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
The birth father's parental rights to your child prior to the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
The birth father's parental rights to your child after the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
Information about the timeframe a legal relinquishment can be signed (e.g., after 48 hours or 72 hours, depending on the state)	<input type="radio"/>	<input type="radio"/>
Information about the circumstances under which a legal relinquishment can be revoked	<input type="radio"/>	<input type="radio"/>
Information about the amount of time that a legal relinquishment can be revoked	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>

To what extent did you feel that the attorney was an advocate for you and your interests in the situation?

- ☐ Not at all
☐ A little
☐ Some
☐ A lot

Do you feel you had enough opportunities to talk to the attorney?

- ☐ Yes
☐ No

Was anyone with you when you met with the attorney (i.e., did anyone go with you)?

- ☐ Yes (please specify) _____
☐ No

Did the agency professional/caseworker talk with you about any of the issues listed below? Please count only discussions you had with adoption agency professional/caseworker, not reading materials, videos, or discussions with other individuals.

	Yes	No
Your options, including both parenting and adoption	<input type="radio"/>	<input type="radio"/>
Resources available to assist you should you desire to parent your child	<input type="radio"/>	<input type="radio"/>
Resources available to assist you should you desire to place your child for adoption	<input type="radio"/>	<input type="radio"/>
Implications of the decision to parent your child	<input type="radio"/>	<input type="radio"/>
Implications of the decision to place your child for adoption	<input type="radio"/>	<input type="radio"/>

Options for independent legal counsel to protect your best interests during the relinquishment process	<input type="radio"/>	<input type="radio"/>
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	Yes	No
The complete continuum of openness in adoption and the implications of a decision to pursue this type of adoption arrangement (i.e., all available options for contact, including letters, pictures, phone calls, visits, etc.)	<input type="radio"/>	<input type="radio"/>
Your right to reconsider your decision at any point prior to the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
Monetary rights, expectations, and responsibilities for your child (e.g., such as child support)	<input type="radio"/>	<input type="radio"/>
Monetary expectations and responsibilities of the agency and/or prospective adoptive family	<input type="radio"/>	<input type="radio"/>
Your parental rights to your child prior to the legal finalization of the relinquishment (e.g., seeing your baby, naming your child, etc.)	<input type="radio"/>	<input type="radio"/>
Your parental rights to your child after the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
The birth father's parental rights to your child prior to the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
The birth father's parental rights to your child after the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
Information about the time frame a legal relinquishment can be signed (e.g., after 48 hours or 72 hours, depending on the state)	<input type="radio"/>	<input type="radio"/>
Information about the circumstances under which a legal relinquishment can be revoked	<input type="radio"/>	<input type="radio"/>
Information about the amount of time that a legal relinquishment can be revoked	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>

To what extent did you feel that the adoption agency professional/caseworker was an advocate for you and your interests in the situation?

- ☐ Not at all
- ☐ A little
- ☐ Some
- ☐ A lot

Do you feel you had enough opportunities to talk to the adoption agency professional/caseworker about your options?

- ☐ Yes
- ☐ No

Was anyone with you when you met with the adoption agency professional/caseworker (i.e., did anyone go with you)?

- ☐ Yes [please specify] _____
- ☐ No

Who referred you to professional counseling services?

- ☐ No one, I located the person on my own
- ☐ My child's birth father
- ☐ Friend or relative
- ☐ Licensed adoption agency
- ☐ Independent attorney representing the adoptive parent
- ☐ Independent attorney representing me
- ☐ Facilitator or intermediary who introduced me to the adoptive parents (if a private independent adoption)
- ☐ Crisis pregnancy center employee

- ☐ Clergy or place of worship
- ☐ I don't know/I can't remember
- ☐ Other [please specify] _____

Did the counselor talk with you about any of the issues listed below? Please count only discussions you had with the counselor, not reading materials, videos, or discussions with other individuals.

	Yes	No
Your options, including both parenting and adoption	<input type="radio"/>	<input type="radio"/>
Resources available to assist you should you desire to parent your child	<input type="radio"/>	<input type="radio"/>
Resources available to assist you should you desire to place your child for adoption	<input type="radio"/>	<input type="radio"/>
Implications of the decision to parent your child	<input type="radio"/>	<input type="radio"/>
Implications of the decision to place your child for adoption	<input type="radio"/>	<input type="radio"/>
Options for independent legal counsel to protect your best interests during the relinquishment process	<input type="radio"/>	<input type="radio"/>
The complete continuum of openness in adoption and the implications of a decision to pursue this type of adoption arrangement (i.e., all available options for contact, including letters, pictures, phone calls, visits, etc.)	<input type="radio"/>	<input type="radio"/>
Your right to reconsider your decision at any point prior to the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
Monetary rights, expectations, and responsibilities for your child (e.g., child support)	<input type="radio"/>	<input type="radio"/>
Monetary expectations and responsibilities of the agency and/or prospective adoptive family	<input type="radio"/>	<input type="radio"/>
Your parental rights to your child prior to the legal finalization of the relinquishment (e.g., seeing your baby, naming your child, etc.)	<input type="radio"/>	<input type="radio"/>
Your parental rights to your child after the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
The birth father's parental rights to your child prior to the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
The birth father's parental rights to your child after the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>
Information about the time frame a legal relinquishment can be signed (e.g., after 48 hours or 72 hours, depending on the state)	<input type="radio"/>	<input type="radio"/>
Information about the circumstances under which a legal relinquishment can be revoked	<input type="radio"/>	<input type="radio"/>
Information about the amount of time that a legal relinquishment can be revoked	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>

To what extent did you feel that the counselor was an advocate for you and your interests in the situation?

- ☐ Not at all
- ☐ A little
- ☐ Some
- ☐ A lot

Do you feel you had enough opportunities to talk to the counselor about your options?

- ☐ Yes
- ☐ No

Was anyone with you when you met with the counselor (i.e., did anyone go with you)?

- ☐ Yes [please specify] _____
☐ No

This section is about the support you had available when you were making a decision about placing your child for adoption. Please indicate how much you disagree or agree with the following statements.

	Very Strongly Disagree	Strongly Disagree	Mildly Disagree	Neither Agree nor Disagree	Mildly Agree	Strongly Agree	Very Strongly Agree
There was a special person who was around when I was in need	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There was a special person with whom I could share joys and sorrows	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My family really tried to help me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I got the emotional help & support I needed from my family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I had a special person who was a real source of comfort to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My friends really tried to help me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I could count on my friends when things went wrong	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I could talk about my problems with my family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I had friends with whom I could share my joys and sorrows	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There was a special person in my life who cared about my feelings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My family was willing to help me make decisions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I could talk about my problems with my friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The Decision & Relinquishment Process

Now we would like to ask you some questions about your decision-making and relinquishment process for the placement. (Note: If you have placed more than one child for adoption, please answer the questions with your most recent placement experience in mind).

When did you first consider placing your child for adoption?

- ☐ As soon as I found out I was pregnant, but before the birth
☐ A few months after I found out I was pregnant, but before the birth
☐ Close to the baby's birth
☐ Immediately after the baby's birth
☐ A few days after the baby's birth
☐ A few months or more after the baby's birth
☐ I don't know/I can't remember

Did you strongly consider other options for your child other than adoption?

- ☐ Yes
☐ No

What other options did you strongly consider? [check all that apply]

- ☐ Parenting my child
- ☐ Letting a relative/friend raise my child (while retaining my parental rights)
- ☐ Marrying my child's birth father and raising the child
- ☐ Termination of the pregnancy
- ☐ Other [please specify] _____

Do you feel you had enough opportunities to talk about your decision with someone?

- ☐ Yes
- ☐ No

Do you feel that you were provided enough information about the options for your child (e.g., parenting and adoption) by the different parties involved?

- ☐ Yes
- ☐ No

What would you have liked to know more about? (check all that apply)

- ☐ Your options, including both parenting and adoption
- ☐ Resources available to assist you should you desire to parent your child
- ☐ Resources available to assist you should you desire to place your child for adoption
- ☐ Implications of the decision to parent your child
- ☐ Implications of the decision to place your child for adoption
- ☐ Options for independent legal counsel to protect your best interests during the relinquishment process
- ☐ The complete continuum of openness in adoption and the implications of a decision to pursue this type of adoption arrangement (i.e., all available options for contact, including letters, pictures, phone calls, visits, etc.)
- ☐ Your right to reconsider your decision at any point prior to the legal finalization of the relinquishment
- ☐ Monetary rights, expectations, and responsibilities for your child (e.g., child support)
- ☐ Monetary expectations and responsibilities of the agency and/or prospective adoptive family
- ☐ Your parental rights to your child prior to the legal finalization of the relinquishment (e.g., seeing your baby, naming your baby, etc.)
- ☐ Your parental rights to your child after the legal finalization of the relinquishment (e.g., seeing your baby, naming your baby, etc.)
- ☐ The birth father's parental rights to your child prior to the legal finalization of the relinquishment
- ☐ The birth father's parental rights to your child after the legal finalization of the relinquishment
- ☐ Information about the time frame a legal relinquishment can be signed (e.g., after 48 hours or 72 hours, depending on the state)
- ☐ Information about the circumstances under which a legal relinquishment can be revoked
- ☐ Information about the amount of time that a legal relinquishment can be revoked
- ☐ Other [please specify] _____

Who do you feel could have done a better job providing this information to you? (check all that apply)

- ☐ Your child's birth father
- ☐ Attorney representing you
- ☐ Attorney representing the adoptive parents
- ☐ Facilitator or intermediary who introduced you to the adoptive parents (if a private independent adoption)
- ☐ Adoption agency professional/caseworker
- ☐ Licensed counselor
- ☐ Clergy or other professional
- ☐ Family members
- ☐ Friends
- ☐ Other [please specify] _____

At any point did you feel pressured to place your child for adoption?

- ☐ Yes
- ☐ No

Who/what pressured you to place your child for adoption? (check all that apply)

- ☐ Agency professionals (e.g., intake worker, counselor, etc.)
- ☐ Attorney for the adoptive parents/agency
- ☐ Attorney representing you
- ☐ Prospective adoptive family for my child
- ☐ My immediate family members (e.g., parents and siblings)
- ☐ My extended family members (e.g., grandparents, aunts, cousins)
- ☐ My significant other
- ☐ My child's birth father
- ☐ My child's birth father's family members (i.e., paternal relatives)
- ☐ My financial circumstances at the time
- ☐ My housing situation at the time
- ☐ Other [please specify] _____

In what ways did you feel pressured? (check all that apply)

- ☐ Possible loss of financial support
- ☐ Possible homelessness/loss of housing
- ☐ Possible loss of emotional/social support
- ☐ Possible loss of custody of my other children
- ☐ Concern that I would owe money to the adoption agency or adoptive family
- ☐ Other [please specify] _____

How influential were the following individuals in your decision to place your child for adoption?

	NA - Not applicable	Not at all	A little	Some	A lot
My parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My other family members	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child's birth father	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child's birth father's family (i.e., paternal relatives)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The prospective adoptive family for my child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adoption agency professionals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My attorney	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attorney for the agency/adoptive parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Professional counselor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other individual [please specify]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How involved were you in the selection of an adoptive family for your child?

- ☐ Not at all involved
- ☐ A little involved
- ☐ Moderately involved
- ☐ Considerably involved
- ☐ Very involved

What was your relationship, if any, to the prospective adoptive family for your child?

- ☐ Not applicable – I did not select a family for my child
- ☐ No relation, I did not have a prior relationship with the family
- ☐ My relative
- ☐ My child's birth father's relative (i.e., paternal relative)
- ☐ Friend
- ☐ Other [please specify] _____

At the time you signed the relinquishment of parental rights document(s), how old were you?

- ☐ Please Select an Age (Drop Down List Provided)

At the time you signed the relinquishment of parental rights document(s), what state did you reside in?

- ☐ Please Select a State (Drop Down List Provided)

State in which you resided when the relinquishment occurred: Other [please specify]

At the time you signed the relinquishment of parental rights document(s), what was your relationship status?

- ☐ Single
☐ Living with partner
☐ Married
☐ Separated
☐ Divorced
☐ Widowed
☐ Other [please specify] _____

At the time you signed the relinquishment of parental rights document(s), what was your living arrangement?

- ☐ Lived alone or with a roommate (non-romantic)
☐ Lived with a spouse or significant other
☐ Lived with my children
☐ Lived with a relative (including parents)
☐ Lived with the prospective adoptive family for my child
☐ Lived in a maternity home
☐ Lived with a "host" family – sponsored by the agency or an attorney
☐ I don't know/I can't remember

At the time you signed the relinquishment of parental rights document(s), what were your sources of your income? (check all that apply)

- ☐ Paycheck or money from a job
☐ Money from family or friends
☐ Money from student loans
☐ Money from a business, fees, dividends, or rental income
☐ Aid such as Temporary Assistance for Needy Families (TANF), WIC, or food stamps
☐ Unemployment benefits
☐ Child support or alimony
☐ Supplemental Security Income (SSI), workers' compensation, disability, veteran benefits
☐ Other [please specify] _____

At the time you signed the relinquishment of parental rights document(s), what was the highest level of education you had completed?

- ☐ Less than high-school
☐ High-school graduate or GED
☐ Some vocational/technical training (after high school)
☐ Completed vocational/technical training (after high school)
☐ Some college/A.A. degree
☐ Completed bachelor's degree
☐ Some graduate training beyond a bachelor's degree
☐ Completed master's degree
☐ Some graduate training beyond a master's degree
☐ Completed doctoral degree or other professional degree (e.g., Ph.D., DDS, JD, MD, etc.)

At the time you signed the relinquishment of parental rights document(s), did you have any mental health issues (diagnosed or undiagnosed)?

- ☐ Yes
☐ Maybe/I'm not sure
☐ No

What were the mental health issue(s) that you had at the time you signed the relinquishment of parental rights document(s)? (check all that apply)

- ☐ Anxiety
- ☐ Bipolar Disorder
- ☐ Depression
- ☐ Obsessive Compulsive Disorder
- ☐ Panic Disorder
- ☐ Post-Traumatic Stress Disorder
- ☐ Schizophrenia
- ☐ Other [please specify] _____

At the time you signed the relinquishment of parental rights document(s), did you have any substance abuse or addiction issues?

- ☐ Yes
- ☐ No
- ☐ Maybe/I'm not sure

When did you sign the relinquishment of parental rights document(s)?

- ☐ While pregnant
- ☐ Within a few hours after the birth of my child
- ☐ 1-2 days after the birth of my child
- ☐ 3-4 days after the birth of my child
- ☐ 5-6 days after the birth of my child
- ☐ 7 or more days after the birth of my child
- ☐ I don't know/I can't remember

Where did you sign the relinquishment documents?

- ☐ Hospital
- ☐ My home
- ☐ Agency or other office setting
- ☐ Courtroom or courthouse
- ☐ Other [please specify] _____

Do you believe you had sufficient amount of time to go over the relinquishment of parental rights document(s) prior to signing?

- ☐ Yes
- ☐ No

In your opinion, what is the absolute soonest that a birth parent should be permitted by law to sign relinquishment of parental rights document(s) for their child?

- ☐ During the pregnancy or within a few hours after the birth
- ☐ 24 hours (1 day) after the birth
- ☐ 48 hours (2 days) after the birth
- ☐ 72 hours (3 days) after the birth
- ☐ 4-5 days after the birth
- ☐ 6-7 days after the birth
- ☐ 8 or more days after the birth
- ☐ I don't know

What reasons did you have for relinquishing your child for adoption? (check all that apply)

- ☐ My age
- ☐ My physical health
- ☐ My emotional/mental health
- ☐ Relationship status (e.g., unmarried or no longer in a relationship with the father of the child)
- ☐ The baby was expected to have serious health issues
- ☐ Financial concerns
- ☐ Lack of social support
- ☐ Religious beliefs
- ☐ Rape
- ☐ Felt unprepared to be a parent
- ☐ Did not want to be a single parent

- ☐ Did not plan to have children
- ☐ Abusive relationship/concern for the child's safety
- ☐ Circumstances in my life were not conducive to parenting a child
- ☐ Pressure from my family
- ☐ Pressure from my friends
- ☐ Pressure from my child's birth father
- ☐ Pressure from my child's birth father's family
- ☐ Pressure from the adoptive family
- ☐ Pressure from adoption professionals (e.g., attorney, counselor, etc.)
- ☐ Pressure from other individuals [please specify]
- ☐ Other [please specify] _____

Of the reasons you selected (listed below), what was the primary reason for your decision? (select only one answer)

- ☐ My age
- ☐ My physical health
- ☐ My emotional/mental health
- ☐ Relationship status (e.g., unmarried or no longer in a relationship with the father of the child)
- ☐ The baby was expected to have serious health issues
- ☐ Financial concerns
- ☐ Lack of social support
- ☐ Religious beliefs
- ☐ Rape
- ☐ Felt unprepared to be a parent
- ☐ Did not want to be a single parent
- ☐ Did not plan to have children
- ☐ Abusive relationship/concern for the child's safety
- ☐ Circumstances in my life were not conducive to parenting a child
- ☐ Pressure from family
- ☐ Pressure from friends
- ☐ Pressure from my child's birth father
- ☐ Pressure from my child's birth father's family
- ☐ Pressure from the adoptive family
- ☐ Pressure from adoption professionals (e.g., attorney, counselor, etc.)
- ☐ Pressure from other individuals [please specify]
- ☐ Other [please specify] _____

Thinking back, to what degree was the decision to relinquish your child for adoption based on your wishes?

- ☐ Not at all
- ☐ A little
- ☐ Some
- ☐ A lot

How satisfied are you with your decision to relinquish your child for adoption?

- ☐ Very dissatisfied
- ☐ Dissatisfied
- ☐ Mixed feelings/ambivalent
- ☐ Satisfied
- ☐ Very satisfied

Have you ever regretted your decision to relinquish your child for adoption?

- ☐ No, and my feelings have not changed over time
- ☐ Yes, and my feelings have not changed over time
- ☐ Yes, I felt regret near the time of placement, but my feelings changed over time
- ☐ No, I did not feel regret near the time of placement, but my feelings changed over time
- ☐ I don't know
- ☐ Other [please specify] _____

Overall, how well do you feel you have adjusted to the decision to relinquish your child for adoption?

- ☐ Very well
- ☐ Somewhat well
- ☐ Neutral
- ☐ Not well
- ☐ Not well at all
- ☐ I don't know

What impact has the adoption had on your life?

- ☐ No impact
- ☐ Overall negative impact
- ☐ Negative impact at first but more positive now
- ☐ Overall positive impact
- ☐ Positive impact at first but more negative now
- ☐ Mixed impact—currently, both positive and negative
- ☐ Other [please specify] _____

When you think back to when you placed your child for adoption, what emotions do you feel at this time about the placement?

(check all that apply)

- ☐ Acceptance
- ☐ Ambivalence
- ☐ Anger
- ☐ Anguish
- ☐ Anxiety
- ☐ Depressed
- ☐ Embarrassment
- ☐ Happiness
- ☐ Peacefulness
- ☐ Powerlessness
- ☐ Pride
- ☐ Relief
- ☐ Sadness
- ☐ Shame
- ☐ Other [please specify] _____

When you compare the emotions that you felt at the time that you actually relinquished your child for adoption to the emotions you feel now when you think back about that time, have your feelings changed or stayed the same?

- ☐ My feelings have grown more negative
- ☐ My feelings have stayed the same
- ☐ My feelings have grown more positive
- ☐ I don't know

Your Delivery Experience

This section includes questions about your delivery experience at the hospital. (Note: If you have placed more than one child for adoption, please answer the questions with your most recent placement experience in mind).

Did you see your baby after the delivery?

- ☐ Yes
- ☐ No

How many times did you see your baby?

- ☐ Once
- ☐ Twice
- ☐ Three times
- ☐ More than three times

Did you hold your baby?

- ☐ Yes
☐ No

Did you feed your baby?

- ☐ Yes
☐ No

Did you name your baby?

- ☐ Yes
☐ No

Who was present with you at the time of the delivery or shortly thereafter? (check all that apply)

- ☐ My child's birth father
☐ My family
☐ My friends
☐ My child's birth father's family (paternal relatives)
☐ The prospective adoptive family for my child
☐ Adoption agency professional(s)
☐ My attorney
☐ Attorney for the agency/adoptive parents
☐ My counselor
☐ Other [please specify] _____

How satisfied were you with your overall hospital experience?

- ☐ Not at all satisfied
☐ A little satisfied
☐ Moderately satisfied
☐ Considerably satisfied
☐ Completely satisfied

Post-Placement Services and Support

Please indicate the types of formal and informal services and supports you had access to after the relinquishment.

	Yes	No
Professional counseling services with a licensed practitioner	<input type="radio"/>	<input type="radio"/>
Informal counseling services (e.g., religious leader, teacher, mentor, etc.)	<input type="radio"/>	<input type="radio"/>
Postnatal care services to monitor your health after the baby's birth	<input type="radio"/>	<input type="radio"/>
Support group for birth parents (online or face-to-face)	<input type="radio"/>	<input type="radio"/>
Specific social media sites/listservs targeted to birth parents	<input type="radio"/>	<input type="radio"/>
General social media sites/listservs for members of the adoption triad (i.e., birth parents, adoptive parents, children adopted)	<input type="radio"/>	<input type="radio"/>
Informal contact with other birth parents you know	<input type="radio"/>	<input type="radio"/>
Family members	<input type="radio"/>	<input type="radio"/>
Friends	<input type="radio"/>	<input type="radio"/>
Conferences	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>

Please indicate how helpful the services and supports you had access to after the relinquishment were.

	Did not use	Not helpful	Neutral or mixed	Somewhat helpful	Very helpful
Professional counseling services with a licensed practitioner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Informal counseling services (e.g., religious leader, teacher, mentor, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Postnatal care services to monitor your health after the baby's birth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Support group for birth parents (online or face-to-face)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specific social media sites/listservs targeted to birth parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
General social media sites/listservs for members of the adoption triad (i.e., birth parents, adoptive parents, children adopted)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Informal contact with other birth parents you know	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family members	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conferences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

From what type of professional counselor did you receive services? (please check all that apply)

- ☐ Not Applicable - I did not see a professional counselor
- ☐ Licensed Clinical Social Worker (LCSW)
- ☐ Licensed Marriage and Family Therapist (LMFT)
- ☐ Licensed Professional Counselor (LPC)
- ☐ Psychologist (PhD or EdD)
- ☐ I don't know/I can't remember
- ☐ Other [please specify] _____

Overall, how satisfied are you with the level of post-placement support available to you to address issues surrounding the relinquishment of your child.

- ☐ Not at all satisfied
- ☐ A little satisfied
- ☐ Moderately satisfied
- ☐ Considerably satisfied
- ☐ Completely satisfied

Post-Placement Contact

The following questions ask you about your current and past communication with the child you placed for adoption.

Which of the following describes your current contact arrangements with your child?

- ☐ I have never had contact with my child
- ☐ I had contact in the past, but it has stopped
- ☐ I have continuing contact with my child

Have you, or anyone else, made any attempts to find information about your child?

- ☐ Yes
- ☐ No

Do you currently have any identifying information regarding your child?

- ☐ Yes
- ☐ No

How frequently do you think about contacting your child?

- ☐ Never
- ☐ Rarely
- ☐ Sometimes
- ☐ Quite a bit
- ☐ A lot

Would you like to have a reunion with your child?

- ☐ Yes
- ☐ No

How far away does your child live from you?

- ☐ Lives in the same city/town
- ☐ Lives in the same state but not the same city/town
- ☐ Lives in the same region of the country but not the same state
- ☐ Lives across the country
- ☐ I don't know where he/she lives

What forms of communication have you had with your child and/or their adoptive parent(s)? (check all that apply)

- ☐ Letters
- ☐ Gifts
- ☐ Pictures
- ☐ Phone calls
- ☐ E-mails
- ☐ Text messages
- ☐ Instant messages or chat
- ☐ Skype / video calls
- ☐ Personal face-to-face visit
- ☐ Facebook – sending and receiving messages
- ☐ Blogs – making comments in response to what is posted
- ☐ Twitter – sending and responding to tweets
- ☐ Other social networking site
- ☐ Through a third party (e.g., adoption agency, attorney, other individual)
- ☐ Other [please specify] _____

Considering all the types of contact mentioned above, how frequently have you had contact with your child, on average, over the past year:

- ☐ None
- ☐ Less than once a year
- ☐ Once or twice per year
- ☐ 3 – 11 times per year
- ☐ 12 or more times per year, or more than once a month
- ☐ Once a week
- ☐ More than once a week
- ☐ Daily
- ☐ Several times a day

On a scale of 1 to 10, where 1 is extremely dissatisfied, 5 is neutral, and 10 is extremely satisfied, please provide your perspective (rating) on your satisfaction with your current contact arrangements with your child.

_____ Satisfaction with Current Contact Arrangements

On a scale of 1 to 10, where 1 is not at all close, 5 is neutral, and 10 is extremely close, please provide your perspective (rating) on your relationship with your child.

_____ How close are you with your child?

On a scale from 1 to 10, as you think about the future, how close would you like your relationship with your child to be?

_____ How close would you like to be with your child?

As you think about the amount of future contact with your child, which of the following applies?

- ☐ I would like the amount of contact we are having now to decrease.
- ☐ I would like the amount of contact we are having now to remain about the same.
- ☐ I would like the amount of contact we are having now to increase.
- ☐ Other [please specify] _____

As you think about the type of future contact (e.g., whether contact is in-person, by e-mail, by Facebook, etc.) with the child you placed for adoption, which of the following applies?

- ☐ I would like the type of contact we are having now to increase.
- ☐ I would like the type of contact we are having now to remain about the same.
- ☐ I would like the type of contact we are having now to decrease.
- ☐ Other [please specify] _____

Final Questions

If there is anything else you would like to tell us about any aspect of your placement experience, we would like to learn more. Please use this space for any additional comments you would like to make.

[Please specify] _____

During the coming months, we will be interviewing birth mothers and birth fathers who have placed a child for adoption. Would you be willing for us to contact you by phone to speak with us further about your experience?

- ☐ Yes
- ☐ No

Thank you for your willingness to speak with us. To help us contact you, please provide the following information:

First name
Email address
Phone number

Thank you for completing this survey. We greatly appreciate the time you have spent to take part in our research. Should you have further questions please do not hesitate to contact the researchers at adoptionstudy@uta.edu or 254-723-4545. If you know of any other individuals who have placed a child for adoption and believe they would benefit from participation in this research, we request that you kindly provide their name and email address, or provide them with our email address and/or telephone number, which is listed above.

First name
State of current residence
Email address

Appendix II: Adoption Professional Survey

Are you at least 18 years or older?

- ☐ Yes
- ☐ No

Do you work for a private adoption agency in a direct service capacity or provide counseling services to expectant parents in the United States who are considering making an adoption plan?

- ☐ Yes
- ☐ No

Demographic Information

Thank you for agreeing to complete this survey. Please read each question carefully and select the option that is most appropriate, or fill in the space provided. First, we would like to ask you some questions about your background.

In which state do you work? (Note: If you work in more than one state, please select the primary state where you spend most of your professional time.)

- ☐ Please Select the State (Drop List of States Provided)
- ☐ Other

What is your age?

- ☐ Please Select Your Age (Drop List of Ages Provided)

What is your gender?

- ☐ Female
- ☐ Male

What is the highest level of education you have completed?

- ☐ High-school graduate or GED
- ☐ Some college
- ☐ Completed bachelor's degree
- ☐ Some graduate training beyond a bachelor's degree
- ☐ Completed master's degree
- ☐ Some graduate training beyond a master's degree
- ☐ Completed doctoral degree or other professional degree (e.g., Ph.D., DSW, Ed.D., etc.)
- ☐ Other [please specify] _____

In what field of study is your undergraduate degree?

- ☐ Anthropology
- ☐ Business
- ☐ Communications
- ☐ Criminal Justice
- ☐ Education
- ☐ English
- ☐ History
- ☐ Human Services
- ☐ Psychology
- ☐ Sciences (e.g., Biology, Chemistry, Physics, Mathematics, etc.)
- ☐ Social Work
- ☐ Sociology
- ☐ Other [please specify] _____

In what field of study is your master's degree? (Note: If more than one master's degree, please select the primary field of study related to your work as an adoption professional, if applicable)

- ☐ Counseling
- ☐ Education
- ☐ Social Work
- ☐ Psychology
- ☐ Other [please specify] _____

Do you identify as any of the following? (please check all that apply)

- ☐ Adoptive parent
- ☐ Birth parent
- ☐ Adoptee
- ☐ None of the above
- ☐ I would rather not answer this question

Your Position and Professional Credentials

Now we would like to ask you some questions about your current position and your professional credentials.

Which of the following statements best describe your current employment situation?

- ☐ I am employed by a licensed private adoption agency
- ☐ I am employed by an independent attorney or law firm not affiliated with an adoption agency
- ☐ I am employed by a private facilitator or intermediary not affiliated with an adoption agency
- ☐ I am employed by a community agency or joint practice that provides therapeutic counseling services (i.e., private therapeutic practice)
- ☐ I am self-employed/contracted (i.e., private therapeutic practice or have contract with private agencies/attorneys) to provide services
- ☐ Other [please specify] _____

How many years have you worked with expectant parents in a professional capacity? (Note: If you are uncertain, please provide your best estimate.)

- ☐ Please Select the Number of Years (Drop List of Years Provided)

At this time, how confident do you feel in your ability to provide decision-making/options counseling services to expectant parents:

- ☐ Extremely confident
- ☐ Moderately confident
- ☐ Slightly confident
- ☐ Neither confident nor unconfident
- ☐ Slightly unconfident
- ☐ Moderately unconfident
- ☐ Extremely unconfident

From what source(s) did you receive training about adoption-specific content? (Please select all that apply)

- ☐ On-the-job training
- ☐ Agency manual
- ☐ Workshops (online or in-person)
- ☐ Conferences [please specify] _____
- ☐ Books/ booklets/ pamphlets or other written materials in print
- ☐ Websites or other online materials
- ☐ Videos or other audio-visual materials
- ☐ Prior education while enrolled in college or in a master's degree
- ☐ Other [please specify] _____

Are you a licensed clinical practitioner (e.g., LPC, LCSW, LMFT, etc.)?

- ☐ Yes
- ☐ No

Which of the following best describes your clinical specialty? (Please check all that apply)

- ☐ Licensed Clinical Social Worker (LCSW)
- ☐ Licensed Marriage and Family Therapist (LMFT)
- ☐ Licensed Professional Counselor (LPC)
- ☐ Licensed Clinical Professional Counselor (LCPC)
- ☐ Limited Licensed Psychologist (LLP)
- ☐ Psychologist (PhD or EdD)
- ☐ I don't know/I can't remember
- ☐ Other [please specify] _____

Does your license permit you to provide therapeutic counseling services to clients?

- ☐ Yes
- ☐ No
- ☐ I don't know/I can't remember

How many years have you been a licensed practitioner? (Note: If you are uncertain, please provide your best estimate.)

- ☐ Please Select the Number of Years (Drop List of Years Provided)

What therapeutic approach(es) do you use when counseling expectant parents? (Please check all that apply)

- ☐ Alderian Therapy
- ☐ Cognitive Behavioral Therapy
- ☐ Crisis Intervention
- ☐ Existential Therapy
- ☐ Family Systems Therapy
- ☐ Gestalt Therapy
- ☐ Humanistic Therapy
- ☐ Narrative Therapy
- ☐ Person-Centered Therapy
- ☐ Psychoanalytic Therapy
- ☐ Reality Therapy
- ☐ Solution-Focused Brief Therapy
- ☐ I don't know/I can't remember
- ☐ Other [please specify] _____

Approximately how many expectant parents do you counsel or work with each year?

- ☐ 5 or less
- ☐ 6-10
- ☐ 11-20
- ☐ 21-30
- ☐ 31-40
- ☐ 41-50
- ☐ 51 or more

Does your state have a minimum number of face-to-face counseling sessions for which expectant parents must be provided? (Note: If you work in more than one state, please select the primary state where you spend most of your professional time.)

- ☐ Yes [please specify the minimum number, if known] _____
- ☐ No
- ☐ I don't know/I can't remember

Understanding that each situation is different, on average, how many times do you counsel expectant parents?

- ☐ 1 time
- ☐ 2-5 times
- ☐ 6-9 times
- ☐ 10-15 times
- ☐ 16 or more times

Information and Services Provided

This section includes questions about the information that you provide expectant parents who are considering making an adoption plan for their child.

Which of the following services do you personally provide expectant and birth parents? (Please check all that apply)

- ☐ Case management services for expectant parents
- ☐ Decision-making/options counseling services for expectant parents
- ☐ Pre-relinquishment support groups for expectant parents
- ☐ Match meetings/introductions between expectant parents and prospective adoptive families
- ☐ Hospital interventions with expectant and new parents
- ☐ Post-relinquishment referrals to birth parents
- ☐ Post-relinquishment therapeutic counseling to birth parent
- ☐ Post-relinquishment support groups for birth parents
- ☐ Post-relinquishment mediation/support between the birth families and adoptive families
- ☐ Other [Please specify] _____

Please indicate whether or not you routinely provide the following adoption-related resources to expectant parents who are considering making an adoption plan.

	Yes	No
Written materials on adoption (e.g., books, pamphlets, etc.)	<input type="radio"/>	<input type="radio"/>
Visual materials on adoption (e.g., videos)	<input type="radio"/>	<input type="radio"/>
Adoption-related websites	<input type="radio"/>	<input type="radio"/>
Access to other expectant parents considering adoption	<input type="radio"/>	<input type="radio"/>
Access to birth parents who have placed a child for adoption	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>

Please indicate whether or not you routinely provide the following parenting-related resources to expectant parents who are considering making an adoption plan.

	Yes	No
Written materials on parenting (e.g., books, pamphlets, etc.)	<input type="radio"/>	<input type="radio"/>
Visual materials on parenting (e.g., videos)	<input type="radio"/>	<input type="radio"/>
Parenting-related websites	<input type="radio"/>	<input type="radio"/>
Access to parents who considered adoption but chose to parent rather than place their child for adoption	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>

Please indicate how often you discuss the following issues with expectant parents during the decision making process? When answering, please count only discussions you personally have with expectant parents, not reading materials, videos, or discussions that parents may have with other individuals during the decision making process.

	Never	Sometimes	About half the time	Most of the time	Always
Their option to parent their child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Positive implications of the decision to parent their child (i.e., pros of parenting)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Negative implications of the decision to parent their child (i.e., cons of parenting)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specific formal community resources available to assist parents should they desire to parent their child (i.e., WIC, TANF, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Never	Sometimes	About half the time	Most of the time	Always
Informal supportive resources that may be available to assist parents should they desire to parent their child (i.e., extended family, friends, church, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Their option to terminate the pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specific community and supportive resources available to parents should they desire to terminate their pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

As with the last question, please indicate how often you discuss the following issues with expectant parents during the decision making process? When answering, please count only discussions you personally have with expectant parents, not reading materials, videos, or discussions that parents may have with other individuals during the decision making process.

	Never	Sometimes	About half the time	Most of the time	Always
Their option to place their child for adoption	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Positive implications of the decision to place their child for adoption (i.e., pros of relinquishing)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Negative implications of the decision to place their child for adoption (i.e., cons of relinquishing)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specific community and supportive resources available to assist parents should they desire to place their child for adoption	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prenatal health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How to promote maternal-child attachment during the pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

As with the last question, please indicate how often you discuss the following issues with expectant parents during the decision making process? When answering, please count only discussions you personally have with expectant parents, not reading materials, videos, or discussions that parents may have with other individuals during the decision making process.

	Never	Sometimes	About half the time	Most of the time	Always
Options for independent legal counsel to protect their best interests during the relinquishment process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The complete continuum of openness in adoption and the implications of a decision to pursue this type of adoption arrangement (i.e., all available options for contact, including letters, pictures, phone calls, visits, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The legal implications of open adoption agreements (i.e., agreements not enforceable in some states)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Never	Sometimes	About half the time	Most of the time	Always
Their right to reconsider their decision at any point prior to the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monetary rights, expectations, and responsibilities for their child (e.g., child support)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monetary expectations and responsibilities of the agency and/or prospective adoptive family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Their rights to their child prior to the legal finalization of the relinquishment (e.g., seeing their baby, naming their baby, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Their right to take the child home and parent the child while making a final decision regarding relinquishment or parenting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

As with the last question, please indicate how often you discuss the following issues with expectant parents during the decision making process? When answering, please count only discussions you personally have with expectant parents, not reading materials, videos, or discussions that parents may have with other individuals during the decision making process.

	Never	Sometimes	About half the time	Most of the time	Always
Their rights to their child after the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discussion that the legal relinquishment time frame (e.g., after 48 hours or 72 hours) is the minimum amount of time in which a relinquishment can be signed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information about the circumstances under which a legal relinquishment can be revoked	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information about the amount of time that a legal relinquishment can be revoked	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The other birth parent's parental rights to his/her child prior to the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The other birth parent's parental rights to his/her child after the legal finalization of the relinquishment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other [please specify]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In your opinion, what is the absolute soonest that a birth parent should be permitted by law to sign relinquishment of parental rights document(s) for their child?

- ☐ During the pregnancy or within a few hours after the birth
- ☐ 24 hours (1 day) after the birth
- ☐ 48 hours (2 days) after the birth
- ☐ 72 hours (3 days) after the birth
- ☐ 4-5 days after the birth
- ☐ 6-7 days after the birth
- ☐ 8 or more days after the birth
- ☐ I don't know

Final Questions

If there is anything else you would like to tell us about your work with expectant parents, we would like to learn more. Please use this space for any additional comments you would like to make.

[Please specify] _____

During the coming months, we will be interviewing adoption professionals and counselors who provide options counseling services to expectant parents. Interview participants will receive a \$30 gift card to Target as a "thank you" for their time. Would you be willing for us to contact you by phone to speak with us further about your experiences?

- ☐ Yes
- ☐ No

Thank you for your willingness to speak with us. To help us contact you for an interview, please provide the following information:

First Name

Phone Number

Email Address

We greatly appreciate the time you've spent to take part in our research. Should you have further questions please do not hesitate to contact the researchers at adoptionstudy@uta.edu or 254-723-4545. If you know of any other individuals who work with expectant parents who might be interested in participating, we request that you kindly provide their name and email address, or provide them with our email address and/or telephone number, which is listed above.

First Name

Email Address